

From: [Ellen Goldman](#)
To: [Chiccine, Catherine](#)
Cc: harvestgrp@aol.com
Subject: RE: Findett ATP information request
Date: Thursday, August 13, 2020 12:14:30 PM
Attachments: [Findett 2019 \(1\).pdf](#)
[Findett 2018 \(1\).pdf](#)
[Findett 2017 \(1\).pdf](#)
[Business Organization Ability to Pay Claim form signed 8-12-20.pdf](#)
[Signature Pg. Sppllemental Info 8-12-20.pdf](#)

Catherine, please see attached completed forms for Findett Real Estate Company. You will note that there are \$180,000 in escrowed funds and it is our understanding that these funds are on the books of Santolube, listed as restricted monies. Please let me know if you need anything else for the 'ability to pay' determination. Thanks, Ellen

Ellen S. Goldman, Esq.

7944 Santa Fe Drive

Overland Park, KS 66204

T: 913/381-9520

F: 913/381-9055

esgoldman@egoldmanlaw.com.

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From: Chiccine, Catherine <chiccine.catherine@epa.gov>
Sent: Tuesday, August 04, 2020 10:07 AM
To: Ellen Goldman <esgoldman@egoldmanlaw.com>
Subject: Findett ATP information request

Ellen,

If you could please forward this along to Mr. Garrison so that he could fill it out and email it back to me by August 14, I'd really appreciate it.

Thanks!

Cathie Chiccine | Attorney-Advisor

United States Environmental Protection Agency, Region 7

913.551.7917 | 11201 Renner Boulevard, Lenexa, Kansas 66219
chiccine.catherine@epa.gov

From: [Ellen Goldman](#)
To: [Chiccine, Catherine](#)
Cc: [Harvestgrp](#)
Subject: FW: Ability to pay Findett
Date: Thursday, August 13, 2020 1:17:51 PM

Catherine, a fact that you and the evaluators may also not be aware of and that may impact the evaluation is that over a decade ago, there was an explosion and fire at the site which destroyed everything of value. The only thing standing at the site after that occurrence is an old brick boiler house and brick Cadmus building. Thanks, Ellen

Ellen S. Goldman, Esq.
7944 Santa Fe Drive
Overland Park, KS 66204
T: 913/381-9520
F: 913/381-9055
esgoldman@egoldmanlaw.com.

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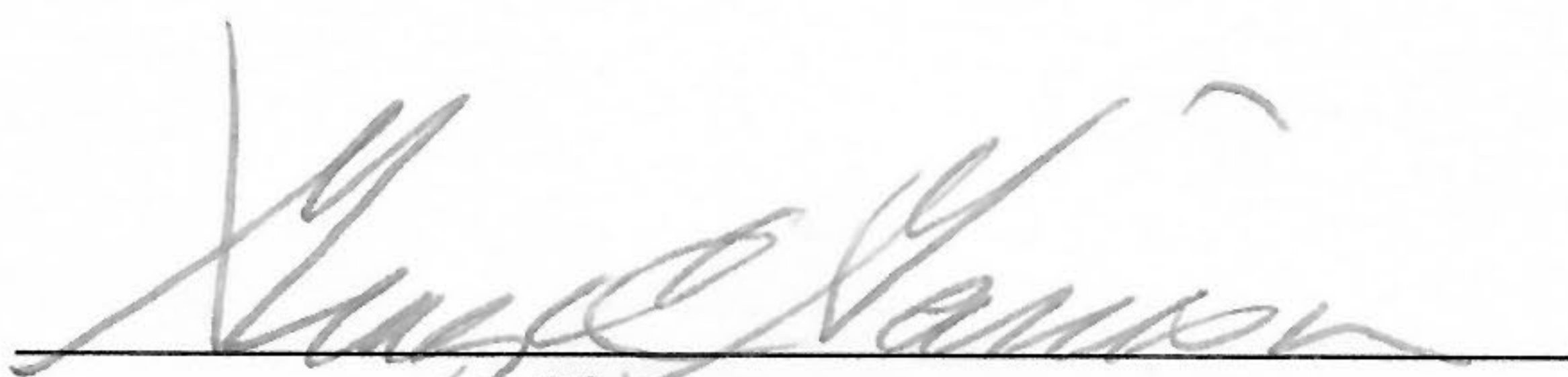
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**BUSINESS ORGANIZATION
ABILITY TO PAY CLAIM
Financial Data Request Form**

This form requests information regarding your financial status. The data will be used to evaluate your ability to pay for an environmental cleanup or penalties. If there is not enough space for your answers, please use additional sheets of paper. Note that we may request further documentation of any of your responses. We welcome any other information you wish to provide supporting your case, particularly, if you feel your situation is not adequately described through the information requested here. If a particular question does not apply to your business, please indicate that it does not apply and give the reason. **Failure to answer all the questions clearly and completely may result in denial of your claim of inability to pay.**

Certification

Under penalties of perjury, I declare that this financial statement submitted by me as a responsible officer of the organization is a true, correct, and complete statement of all organization income and assets, real and personal, whether held in the company name or otherwise to the best of my knowledge and belief. I further understand that I will be subject to prosecution by the United States Government to the fullest extent possible under the law should I provide any information that is not true, correct, and complete to the best of my knowledge.


Signature

August 9, 2020
Date

George E Garrison
Name (printed or typed)

President
Corporate Position

(Use Additional Sheets Where Needed)

Spartanburg	SC	29302
City	State	Zip

NOTE: Attach Schedule of all Business

3. **Addresses** Foreign_____Domestic X_____

4. Legal Form of Business Organization during the last three years.

____ Corporation

X Subchapter S Corporation

Partnership

_____ Proprietorship

Trust

Other: _____

5. State of Incorporation Missouri Date of Incorporation 04/23/1962

6. Name of Registered Agent: National Registered Agents Inc

7. Address of Registered Agent: 120 South Central Ave
Street

City State Zip

Phone

8. Name and address of principal stockholders and number of shares owned by each stockholder. (If more than 8 shareholders, list only those with 5 percent or more stock ownership). If your business is a partnership, list all partners and ownership percentage.

Total outstanding shares: 100

Name	Address	Shares
1. George E Garrison	(b) (6)	100
2.		
3.		
4.		
5.		
6.		
7.		
8.		

9.

A. Name and address of current (and previous three years) officers and number of shares held by each. For partnerships, list all partners for last three years.

Name	Address	Shares	Term
George E Garrison	(b) (6)	100	

- B. Name and address of current (and previous three years) members of board of directors and number of shares held by each.

Name	Address	Shares	Term
George E Garrison	(b) (6)	100	

10. Has this organization ever issued a prospectus for the sale of stock? Yes___ No X
If yes, list date, number and type of shares for each prospectus during the last three years.

Date	Number of Shares	Type of Shares

11.
A. Registration on international, national or local stock exchange(s). Give details, including date of registration and/or de-listing.

1. _____
2. _____
3. _____
4. _____

- B. Total authorized shares for each type issued and present market value per share on each type of stock (or book value if not actively traded)

Types of Shares	Total Shares	Book Value	Market Value
1.			
2.			
3.			
4.			

- C. Total outstanding shares of each type of stock currently being held as Treasury Stock.

- D. Total outstanding shares of each type of stock.

- E. Amount of bonded debt and principal bondholders.

12. List states and municipalities to which taxes have been paid and/or are being paid. Describe nature and amount of such taxes, state most recent year of payments thereof and whether tax payments are current.

Missouri, 2019, No taxes due.

13. Has this organization filed United States income tax returns during the last three years?

Yes ☒ No ☐

To what I.R.S. Office(s)

E-File

What Years?

2017, 2018, and 2019

Are Federal Taxes current? Yes X No

Provide **SIGNED** Federal income tax returns and **ALL** associated schedules for the last three years.

14. Name and address of:

A Organization's Independent Certified Public Accountants

B. Organization's Attorney(s) presently and during the last three years.

15. Has this organization filed financial forms with any organization or government entity? List name(s) of organization or entity, date and type of financial form.

16. Does this organization have a Balance Sheet, Income Statement, Statement of Retained Earnings, and/or Statement of Cash Flows or similar financial statements? Provide one copy of each financial statement for the current year and the last three years (audited statements are preferred).

17.

A. Assets

		Most Recent Year	2 nd Most Recent Year	3rd Most Recent Year
<u>Cash</u>	\$	0	0	0
<u>Securities</u>	\$	0	0	0
<u>Facilities</u>	\$	0	0	0
<u>Depreciation</u>	\$			
<u>Equipment</u>	\$	0	0	0
<u>Depreciation</u>	\$			
<u>Inventory</u>	\$	0	0	0
<u>Accounts Receivable</u>	\$	0	0	0
<u>Other</u> Land Net of Depreciation	\$	14,095	14,095	14,095
<u>TOTAL ASSETS</u>	\$	14,065	14,095	14,095

B. Liabilities and Stockholder's Equity

Liabilities

		Most Recent Year	2nd Most Recent Year	3rd Most Recent Year
Loans Principal	\$	0	0	0
Monthly Payment	\$			
Mortgages Principal	\$			
Monthly Payment	\$			
Accounts Payable	\$	0	0	0
Deferred Taxes	\$			
Insurance Premiums	\$			
Other	\$			

Stockholder's Equity

Common Stock	\$	13,248	13,248	13,248
Paid-in Capital	\$	8,175	8,175	8,175
Retained Earnings	\$	0	0	0
TOTAL LIABILITIES & EQUITY	\$	14,095	14,095	14,095

18. Loans Payable: None

A.

Owed to:	Purpose:
Term:	Interest Rate:
Collateral:	Cosigner:
Monthly Payments:	
Original Amount:	Date:
Present Balance	

B.

Owed to:	Purpose:
Term:	Interest Rate:
Collateral:	Cosigner:
Monthly Payments:	
Original Amount:	Date:
Present Balance	

C.

Owed to:	Purpose:
Term:	Interest Rate:
Collateral:	Cosigner:
Monthly Payments:	
Original Amount:	Date:
Present Balance	

D.

Owed to:	Purpose:
Term:	Interest Rate:
Collateral:	Cosigner:
Monthly Payments:	
Original Amount:	Date:
Present Balance	

19. Mortgages Payable: None

A.

Owed To:	Address of Property:
Term:	Interest Rate:
Collateral:	Cosigner:
Monthly Payments:	
Original Amount:	Date:
Present Balance:	

B.

Owed To:	Address of Property:
Term:	Interest Rate:
Collateral:	Cosigner:
Monthly Payments:	
Original Amount:	Date:
Present Balance:	

C.

Owed To:	Address of Property:
Term:	Interest Rate:
Collateral:	Cosigner:
Monthly Payments:	
Original Amount:	Date:
Present Balance:	

D.

Owed To:	Address of Property:
Term:	Interest Rate:
Collateral:	Cosigner:
Monthly Payments:	
Original Amount:	Date:
Present Balance:	

20. Income/Expenses:

Gross Income

		Most Recent Year	2 nd Most Recent Year	3 rd Most Recent Year
Net Sales	\$	0	0	0
Interest Income	\$			
Dividends	\$			
Other	\$			

Operating Expenses

Wages	\$			
Overhead	\$			
Lease Payments	\$			
Interest Expense	\$			
Cost of Sales	\$			
Net Income	\$	0	0	0

21. Provide the following firm size information:

	Most Recent Year	2 nd Most Recent Year	3 rd Most Recent Year
Number of Employees	0	0	0
Size of Warehouse(s)	1,500	1,500	1,500
Volume Shipped	0	0	0
Other	0	0	0

22. Does this organization maintain bank accounts? Give names and addresses of banks, savings and loan associations, and other such entities within the United States or located elsewhere. No.

A. Checking:

Name of Bank	Address of Bank	Account #	Balance

B. Savings/Certificate of Deposit:

Name of Bank	Address of Bank	Account #	Balance

C. Other Accounts:

Name of Institution	Address of Institution	Account #	Balance

D. Savings & Loan Associations or other such entities:

Name of Institution	Address of Institution	Account #	Balance

E. Trust Account(s):

Name of Institution Balance	Address of Institution	Account #	

F. Other Account(s):

Name of Institution Balance	Address of Institution	Account #	

23. List all commercial paper, negotiable or nonnegotiable, in which the organization has any interest whatsoever, presently in transit or in the possession of any banking institution. Describe such paper and the organization's interest therein, and state its present location. List all loans receivable in excess of \$10,000.00 and specify if due from an officer, stockholder, or director.

None

24. Has this organization engaged in any Joint Loan Agreements, including Letters of Credits, with any other organization(s)? If yes, describe all such agreements.

None

25. Does this organization have any debt coinsured by another organization? If yes, describe such arrangements.

None

26. List all equity participation in other organizations, both domestic and foreign, in which this organization has an interest, including the type, amount and terms of such interest.

None

27. List all debt participation in other organizations, both domestic and foreign, in which this organization has an interest, including the type, amount and terms of such interest.

None

28. Is this organization presently:

A. Active

(Answer No for inactive, but still in existence) Yes _____ No x

B. Void and/or terminated by State authority. Yes _____ No _____

C. Otherwise dissolved Yes _____ No _____

1. Date _____

2. By Whom _____

3. Reason _____

29.

A. List corporate salaries, bonuses to and/or drawings of the following personnel for the last three years: None

Name	Position/Title	Most Recent Year	2 nd Most Recent Year	3 rd Most Recent Year
	President	0	0	0
	Vice President			
	Chairman/Board			
	Secretary			
	Treasurer			

B. List the five most highly compensated employees or officers other than the above, describe position and list annual salary and/or bonus for the last three years: None

Name	Position/Title	Most Recent Year	2 nd Most Recent Year	3 rd Most Recent Year

C. Describe the nature of the compensation paid to the persons listed in (A) and (B) above and set forth any stock options, pensions, profit sharing, royalties, or other deferred compensation rights of said persons.

None

30. List the organization's commercial activity, (fields of activity resulting in income), and SIC Code. None

	<u>Commercial Activity</u>	<u>SIC Code</u>
Primary	_____	_____
Other 1.	_____	_____
Other 2.	_____	_____
Other 3.	_____	_____

31. List all other supplementary fields of activity in which this organization is engaged, either directly, through its affiliates, stating the name(s) and states(s) of incorporation of such subsidiaries or affiliates: None

32. Has this organization at any time been the subject of any proceeding under the provisions of any State Insolvency Law, or the Federal Bankruptcy Act, as amended? If so, supply the following information as to each proceeding: No

A. Date (Commencement)

B. Date (Termination)

C. Discharge or other disposition, if any, and operative effect thereof:

D. State Court _____ Docket No. _____
County

E. Federal Court _____ Docket No. _____
County

33. List all real estate, and personal property of an estimated value in excess of \$ 10,000.00 owned or under contract to be purchased by this organization with names and addresses of seller and contract price and where located: None

34. List and describe all judgments, recorded and unrecorded, this organization is a party of:

A. Against the organization

None

B. In favor of the organization

None

35. List and describe all other encumbrances (including but not limited to security interest, whether perfected or not) against any such personal property owned by the organization as is listed in 33 above.

None

36. List all life insurance, now in force on any or all officers, directors, and/or "key" employees, setting forth face amounts, names of life insurance companies and policy numbers where this organization has an "insurable interest" and/or paying the premium or part of same. Where applicable, indicate under which policy(s) this organization is a beneficiary, type of policy(s) this organization is a beneficiary, yearly premium, and location of policy(s). In addition, state the cash value if any and the conditions of any borrowing options available under each policy.

None

37. For the following types of policies, list all primary and excess insurance policies, the deductible amount, the per occurrence and aggregate coverage limit for each policy.

A. Comprehensive General Liability

None

B. Environmental Impairment Liability

None

C. Other policies for which coverage might apply including participation in risk retention pools.

None

Other

38. List all transfers of assets (real and/or personal) over \$10,000.00 made by this organization, OTHER THAN IN THE ORDINARY COURSE OF BUSINESS, during the last three years and state to whom transfer was made. Describe compensation paid by recipient and to whom. None

Date	Value	Property Transferred	To Whom	Compensation Paid

39. Is this business organization a party in any law suit now pending?

Yes (Give details below) _____ No x

40. List names and addresses of any persons or other business entity holding funds in escrow or in trust for this organization, or any of its subsidiaries or affiliates.

Regions Bank, 8182 Maryland Ave., 12th Floor, St. Louis, MO 63105

41. Other information requested:

SUPPLEMENTAL INFORMATION
ABILITY TO PAY CLAIM
Financial Data Request Form

If you are claiming that past financial data does not completely and accurately reflect your business's current ability to pay in light of the current economy, please provide the following information in addition to other financial data:

1. Audited monthly (or quarterly) income statements, balance sheets, and cash flow statements for the current year-to-date and the previous two years.
2. Letter from head of business (e.g., CEO, CFO) describing specific effects of current market conditions on business operations (e.g. employee layoffs, curtailed production schedule, etc.).
3. Any financial information/analyses from relevant trade organizations demonstrating impact of current economic conditions on business/industry
4. Correspondence from financial institution(s) on status of the business's lines of credit
5. Current credit ratings and bond ratings from rating companies such as Moody's, Standard & Poor's, Fitch, etc.

Certification

Under penalties of perjury, I declare that this financial statement submitted by me as responsible officer or representative of the organization is a true, correct, and complete statement of all the organization income assets, real and personal, whether held in the organization's name or otherwise to the best of my knowledge and belief. I further understand that I may be subject to prosecution by the United States Government to the fullest extent possible under the law should I provide any information that is not true, correct, and complete to the best of my knowledge.

Signature

Date

Name (printed or typed)

Position or Title

DIXON HUGHES GOODMAN LLP
P.O. BOX 25849
GREENVILLE, SC 29616

FINDETT REAL ESTATE CORPORATION
PO BOX 960
ST. CHARLES, MO 63302-0960

|||||

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CLIENT'S COPY



MARCH 11, 2018

FINETT REAL ESTATE CORPORATION
PO BOX 960
ST. CHARLES, MO 63302-0960

FINETT REAL ESTATE CORPORATION:

WE HAVE PREPARED AND ENCLOSED YOUR 2017 S CORPORATION INCOME TAX RETURNS FOR THE YEAR ENDED DECEMBER 31, 2017.

THIS RETURN HAS BEEN PREPARED FOR ELECTRONIC FILING. IF YOU WISH TO HAVE IT TRANSMITTED ELECTRONICALLY TO THE IRS, PLEASE SIGN, DATE, AND RETURN FORM 8879-S TO OUR OFFICE. WE WILL THEN SUBMIT YOUR ELECTRONIC RETURN TO THE IRS. DO NOT MAIL THE PAPER COPY OF THE RETURN TO THE IRS. RETURN FEDERAL FORM 8879-S TO US BY MARCH 15, 2018.

NO PAYMENT IS REQUIRED.

THE MISSOURI FORM MO-1120S RETURN HAS BEEN PREPARED FOR ELECTRONIC FILING. IF YOU WISH TO HAVE IT TRANSMITTED ELECTRONICALLY TO THE MO DOR PLEASE CONTACT OUR OFFICE. DO NOT MAIL THE PAPER COPY OF THE RETURN TO THE MO DOR. RETURN FEDERAL FORM 8879-S TO US BY APRIL 17, 2018.

NO PAYMENT IS REQUIRED.

ATTACHED IS A SCHEDULE K-1 FOR THE SHAREHOLDER INDICATING THEIR SHARE OF INCOME, DEDUCTIONS AND CREDITS TO BE REPORTED ON THEIR TAX RETURN. THIS SCHEDULE SHOULD BE IMMEDIATELY FORWARDED TO THE SHAREHOLDER.

WE PREPARED THE RETURNS FROM INFORMATION YOU FURNISHED US WITHOUT VERIFICATION. UPON EXAMINATION OF THE RETURNS BY TAXING AUTHORITIES, REQUESTS MAY BE MADE FOR UNDERLYING DATA. WE THEREFORE RECOMMEND THAT YOU PRESERVE ALL RECORDS WHICH YOU MAY BE CALLED UPON TO PRODUCE IN CONNECTION WITH SUCH AN EXAMINATION.

WE HAVE PROVIDED YOU TAX ADVICE IN CONNECTION WITH THE PREPARATION OF YOUR U.S. FEDERAL TAX RETURN AND ASSOCIATED TAX PLANNING SERVICES WE HAVE FURNISHED. THIS ADVICE IS NOT INTENDED OR WRITTEN TO BE USED BY ANY TAXPAYER FOR THE PURPOSE OF AVOIDING PENALTIES THAT MAY BE IMPOSED ON THE TAXPAYER BY THE INTERNAL REVENUE SERVICE, AND IT CANNOT BE USED BY ANY TAXPAYER FOR SUCH PURPOSE.

COPIES OF THE RETURNS ARE ENCLOSED FOR YOUR FILES. WE SUGGEST THAT YOU RETAIN THESE COPIES INDEFINITELY.

WE SINCERELY APPRECIATE THE OPPORTUNITY TO SERVE YOU. PLEASE CONTACT US IF YOU HAVE ANY QUESTIONS CONCERNING THE TAX RETURNS.

SINCERELY,

DIXON HUGHES GOODMAN LLP

2017 TAX RETURN FILING INSTRUCTIONS

U.S. INCOME TAX RETURN FOR AN S CORPORATION

FOR THE YEAR ENDING

DECEMBER 31, 2017

PREPARED FOR:

FINETT REAL ESTATE CORPORATION
PO BOX 960
ST. CHARLES, MO 63302-0960

PREPARED BY:

DIXON HUGHES GOODMAN LLP
P.O. BOX 25849
GREENVILLE, SC 29616

TO BE SIGNED AND DATED BY:

THE APPROPRIATE CORPORATE OFFICER(S).

AMOUNT OF TAX:

TOTAL TAX	\$	0
LESS: PAYMENTS AND CREDITS	\$	0
PLUS: INTEREST AND PENALTIES	\$	0
NO PAYMENT REQUIRED	\$	

OVERPAYMENT:

NOT APPLICABLE

MAKE CHECK PAYABLE TO:

NOT APPLICABLE

MAIL TAX RETURN AND CHECK (IF APPLICABLE) TO:

THIS RETURN HAS BEEN PREPARED FOR ELECTRONIC FILING. TO HAVE IT TRANSMITTED ELECTRONICALLY TO THE IRS, PLEASE SIGN, DATE AND RETURN FORM 8879-S TO OUR OFFICE. WE WILL THEN SUBMIT YOUR ELECTRONIC RETURN.

RETURN MUST BE MAILED ON OR BEFORE:

RETURN FEDERAL FORM 8879-S TO US BY MARCH 15, 2018.

SPECIAL INSTRUCTIONS:

ENCLOSED IS A COPY OF SCHEDULE K-1 TO BE DISTRIBUTED TO THE SHAREHOLDER.

Number 1	Number
Name: GEORGE E.	Name:
GARRISON	K-1 TOTALS

Number 1	Number
Name: GEORGE E.	Name:
GARRISON	K-1 TOTALS

S CORPORATION
Two-Year Comparison

2017

Name	Employer Identification Number
FINDETT REAL ESTATE CORPORATION	43-0787463

Description	Prior Year	Current Year	Increase (Decrease)
ORDINARY BUSINESS INCOME (LOSS):			
INCOME:			
DEDUCTIONS:			
S CORPORATION TAXES:			
PAYMENTS AND CREDITS:			
BALANCE DUE OR REFUND:			
SCHEDULE K:			
INCOME:			
DEDUCTIONS:			
INVESTMENT INTEREST:			
CREDITS:			
FOREIGN TAXES:			
AMT ITEMS:			
OTHER SCHEDULE K ITEMS:			
SCHEDULE M-1:			
SCHEDULE M-2:			
ACCUMULATED ADJUSTMENTS ACCOUNT:			
BALANCE AT BEGINNING OF TAX YEAR	-12,868.	-12,868.	
COMBINE LINES 1 THROUGH 5	-12,868.	-12,868.	
BALANCE AT END OF TAX YEAR	-12,868.	-12,868.	
OTHER ADJUSTMENTS ACCOUNT:			
SHAREHOLDERS' UNDISTRIBUTED TAXABLE INCOME PREVIOUSLY TAXED:			

U.S. Income Tax Return for an S Corporation

OMB No. 1545-0123

Department of the Treasury
Internal Revenue Service▶ Do not file this form unless the corporation has filed or is
attaching Form 2553 to elect to be an S corporation.▶ Go to www.irs.gov/Form1120S for instructions and the latest information.

2017

For calendar year 2017 or tax year beginning , and ending

A S election effective date 01/01/2004	TYPE OR PRINT	Name FINDETT REAL ESTATE CORPORATION	D Employer identification number 43-0787463
B Business activity code number (see instructions) 531390		Number, street, and room or suite no. If a P.O. box, see instructions. PO BOX 960	E Date incorporated 04/23/1962
C Check if Sch. M-3 attached <input type="checkbox"/>		City or town, state or province, country, and ZIP or foreign postal code ST. CHARLES, MO 63302-0960	F Total assets (see instructions) \$ 14,095.
G Is the corporation electing to be an S corporation beginning with this tax year? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes," attach Form 2553 if not already filed			
H Check if: (1) <input type="checkbox"/> Final return (2) <input type="checkbox"/> Name change (3) <input type="checkbox"/> Address change (4) <input type="checkbox"/> Amended return (5) <input type="checkbox"/> S election termination or revocation			
I Enter the number of shareholders who were shareholders during any part of the tax year 1			

Caution: Include only trade or business income and expenses on lines 1a through 21. See the instructions for more information.

Income	1 a Gross receipts or sales	b Return and allowances	c Bal. Subtract line 1b from line 1a	1c
	2 Cost of goods sold (attach Form 1125-A)			2
	3 Gross profit. Subtract line 2 from line 1c			3
	4 Net gain (loss) from Form 4797, line 17 (attach Form 4797)			4
	5 Other income (loss) (attach statement)			5
	6 Total income (loss). Add lines 3 through 5			6
Deductions (See instructions for limitations)	7 Compensation of officers (see instrs. - attach Form 1125-E)			7
	8 Salaries and wages (less employment credits)			8
	9 Repairs and maintenance			9
	10 Bad debts			10
	11 Rents			11
	12 Taxes and licenses			12
	13 Interest			13
	14 Depreciation not claimed on Form 1125-A or elsewhere on return (attach Form 4562)			14
	15 Depletion (Do not deduct oil and gas depletion.)			15
	16 Advertising			16
	17 Pension, profit-sharing, etc., plans			17
	18 Employee benefit programs			18
	19 Other deductions (attach statement)			19
	20 Total deductions. Add lines 7 through 19			20
	21 Ordinary business income (loss). Subtract line 20 from line 6			21 0.
Tax and Payments	22 a Excess net passive income or LIFO recapture tax (see instructions)	22a		22c
	b Tax from Schedule D (Form 1120S)	22b		
	c Add lines 22a and 22b			
	23 a 2017 estimated tax payments and 2016 overpayment credited to 2017	23a		23d
	b Tax deposited with Form 7004	23b		
	c Credit for federal tax paid on fuels (attach Form 4136)	23c		
	d Add lines 23a through 23c			
	24 Estimated tax penalty (see instructions). Check if Form 2220 is attached			24
	25 Amount owed. If line 23d is smaller than the total of lines 22c and 24, enter amount owed			25
	26 Overpayment. If line 23d is larger than the total of lines 22c and 24, enter amount overpaid			26
	27 Enter amount from line 26 Credited to 2018 estimated tax		Refunded	27

Sign Here	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.		May the IRS discuss this return with the preparer shown below (see instr.)? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
	Signature of officer	Date	

Paid Preparer Use Only	Print/Type preparer's name JAMES F. TENPAS	Preparer's signature	Date	Check if self-employed <input type="checkbox"/>	PTIN P00688810
	Firm's name ▶ DIXON HUGHES GOODMAN LLP	Firm's EIN ▶ 56-0747981			
	Firm's address ▶ P.O. BOX 25849 GREENVILLE, SC 29616	Phone no. (864) 288-5544			

JWA For Paperwork Reduction Act Notice, see separate instructions.

Form 1120S (2017)

Schedule B Other Information (see instructions)					Yes	No
1 Check accounting method: (a) <input type="checkbox"/> Cash (b) <input checked="" type="checkbox"/> Accrual (c) <input type="checkbox"/> Other (specify) ▶						
2 See the instructions and enter the:						
(a) Business activity ▶ REAL ESTATE (b) Product or service ▶ REAL ESTATE INVESTME						
3 At any time during the tax year, was any shareholder in the corporation a disregarded entity, a trust, an estate, or a nominee or similar person? If "Yes," attach Schedule B-1, Information on Certain Shareholders of an S Corporation						X
4 At the end of the tax year, did the corporation:						
a Own directly 20% or more, or own, directly or indirectly, 50% or more of the total stock issued and outstanding of any foreign or domestic corporation? For rules of constructive ownership, see instructions. If "Yes," complete (i) through (v) below						X
(i) Name of Corporation	(ii) Employer Identification Number (if any)	(iii) Country of incorporation	(iv) Percentage of Stock Owned	(v) If Percentage in (iv) is 100%. Enter the Date (if any) a Qualified Subchapter S Subsidiary Election Was Made		
b Own directly an interest of 20% or more, or own, directly or indirectly, an interest of 50% or more in the profit, loss, or capital in any foreign or domestic partnership (including an entity treated as a partnership) or in the beneficial interest of a trust? For rules of constructive ownership, see instructions. If "Yes," complete (i) through (v) below						X
(i) Name of Entity	(ii) Employer Identification Number (if any)	(iii) Type of Entity	(iv) Country of Organization	(v) Maximum Percentage Owned in Profit, Loss, or Capital		
5a At the end of the tax year, did the corporation have any outstanding shares of restricted stock? If "yes" complete lines (i) and (ii) below						X
(i) Total shares of restricted stock ▶						
(ii) Total shares of non-restricted stock ▶						
b At the end of the tax year, did the corporation have any outstanding stock options, warrants, or similar instruments? If "yes" complete lines (i) and (ii) below						X
(i) Total shares of stock outstanding at the end of the tax year ▶						
(ii) Total shares of stock outstanding if all instruments were executed ▶						
6 Has this corporation filed, or is it required to file, Form 8918, Material Advisor Disclosure Statement, to provide info. on any reportable transaction? ...						X
7 Check this box if the corporation issued publicly offered debt instruments with original issue discount ▶ <input type="checkbox"/> If checked, the corporation may have to file Form 8281, Information Return for Publicly Offered Original Issue Discount Instruments.						
8 If the corporation: (a) was a C corporation before it elected to be an S corporation or the corporation acquired an asset with a basis determined by reference to the basis of the asset (or the basis of any other property) in the hands of a C corporation and (b) has net unrealized built-in gain in excess of the net recognized built-in gain from prior years, enter the net unrealized built-in gain reduced by net recognized built-in gain from prior years ▶ \$						
9 Enter the accumulated earnings and profits of the corporation at the end of the tax year ▶ \$						
10 Does the corporation satisfy both of the following conditions?						
a The corporation's total receipts (see instructions) for the tax year were less than \$250,000						
b The corporation's total assets at the end of the tax year were less than \$250,000					X	
If "Yes," the corporation is not required to complete Schedules L and M-1						
11 During the tax year, did the corporation have any non-shareholder debt that was cancelled, was forgiven, or had the terms modified so as to reduce the principal amount of the debt?						X
If "Yes," enter the amount of principal reduction \$						
12 During the tax year, was a qualified subchapter S subsidiary election terminated or revoked? If "Yes," see instructions						X
13a Did the corporation make any payments in 2017 that would require it to file Form(s) 1099?						X
b If "Yes," did the corporation file or will it file all required Forms 1099?						

Schedule K Shareholders' Pro Rata Share Items		Total amount	
Income (Loss)	1 Ordinary business income (loss) (page 1, line 21)	1	
	2 Net rental real estate income (loss) (attach Form 8825)	2	
	3a Other gross rental income (loss) 3a		
	b Expenses from other rental activities (attach statement) 3b		
	c Other net rental income (loss). Subtract line 3b from line 3a	3c	
	4 Interest income	4	
	5 Dividends: a Ordinary dividends	5a	
	b Qualified dividends 5b		
	6 Royalties	6	
	7 Net short-term capital gain (loss) (attach Schedule D (Form 1120S))	7	
Deductions	8a Net long-term capital gain (loss) (attach Schedule D (Form 1120S))	8a	
	b Collectibles (28%) gain (loss) 8b		
	c Unrecaptured section 1250 gain (attach statement) 8c		
	9 Net section 1231 gain (loss) (attach Form 4797)	9	
	10 Other income (loss) (see instructions) ... Type ▶	10	
	11 Section 179 deduction (attach Form 4562)	11	
	12a Charitable contributions	12a	
	b Investment interest expense	12b	
	c Section 59(e)(2) expenditures (1) Type ▶		
	(2) Amount ▶	12c(2)	
Credits	d Other deductions (see instructions) Type ▶	12d	
	13a Low-income housing credit (section 42(j)(5))	13a	
	b Low-income housing credit (other)	13b	
	c Qualified rehabilitation expenditures (rental real estate) (attach Form 3468)	13c	
	d Other rental real estate credits (see instructions) Type ▶	13d	
	e Other rental credits (see instructions) Type ▶	13e	
	f Biofuel producer credit (attach Form 6478)	13f	
	g Other credits (see instructions) Type ▶	13g	
Foreign Transactions	14a Name of country or U.S. possession ▶		
	b Gross income from all sources	14b	
	c Gross income sourced at shareholder level	14c	
	Foreign gross income sourced at corporate level		
	d Passive category	14d	
	e General category	14e	
	f Other (attach statement)	14f	
	Deductions allocated and apportioned at shareholder level		
	g Interest expense	14g	
	h Other	14h	
	Deductions allocated and apportioned at corporate level to foreign source income		
	i Passive category	14i	
	j General category	14j	
	k Other (attach statement)	14k	
Other information			
l Total foreign taxes (check one): <input type="checkbox"/> Paid <input type="checkbox"/> Accrued	14l		
m Reduction in taxes available for credit (attach statement)	14m		
n Other foreign tax information (attach statement)			
Alternative Minimum Tax (AMT) Items	15a Post-1986 depreciation adjustment	15a	
	b Adjusted gain or loss	15b	
	c Depletion (other than oil and gas)	15c	
	d Oil, gas, and geothermal properties - gross income	15d	
	e Oil, gas, and geothermal properties - deductions	15e	
	f Other AMT items (attach statement)	15f	
Items Affecting Shareholder Basis	16a Tax-exempt interest income	16a	
	b Other tax-exempt income	16b	
	c Nondeductible expenses	16c	
	d Distributions (attach statement if required)	16d	
	e Repayment of loans from shareholders	16e	

Schedule K Shareholders' Pro Rata Share Items (continued)		Total amount	
Other Information	17a Investment income	17a	
	b Investment expenses	17b	
	c Dividend distributions paid from accumulated earnings and profits	17c	
	d Other items and amounts (att. stmt.)		
Reconciliation	18 Income/loss reconciliation. Combine the amounts on lines 1 through 10 in the far right column. From the result, subtract the sum of the amounts on lines 11 through 12d and 14l	18	

Schedule L Balance Sheets per Books		Beginning of tax year		End of tax year	
	(a)	(b)	(c)	(d)	
Assets					
1 Cash					
2 a Trade notes and accounts receivable					
b Less allowance for bad debts					
3 Inventories					
4 U.S. government obligations					
5 Tax-exempt securities					
6 Other current assets (att. stmt.)					
7 Loans to shareholders					
8 Mortgage and real estate loans					
9 Other investments (att. stmt.)					
10 a Buildings and other depreciable assets					
b Less accumulated depreciation					
11 a Depletable assets					
b Less accumulated depletion					
12 Land (net of any amortization)		14,095.		14,095.	
13 a Intangible assets (amortizable only)	150,000.		150,000.		
b Less accumulated amortization	150,000.	0.	150,000.	0.	
14 Other assets (att. stmt.)					
15 Total assets		14,095.		14,095.	
Liabilities and Shareholders' Equity					
16 Accounts payable					
17 Mortgages, notes, bonds payable in less than 1 year					
18 Other current liabilities (att. stmt.)					
19 Loans from shareholders					
20 Mortgages, notes, bonds payable in 1 year or more					
21 Other liabilities (att. stmt.)					
22 Capital stock		13,248.		13,248.	
23 Additional paid-in capital		8,175.		8,175.	
24 Retained earnings		2,431,599.		2,431,599.	
25 Adjustments to shareholders' equity (att. stmt.)					
26 Less cost of treasury stock		(2,438,927.)		(2,438,927.)	
27 Total liabilities and shareholders' equity		14,095.		14,095.	

JWA

Form 1120S (2017)

Schedule M-1**Reconciliation of Income (Loss) per Books With Income (Loss) per Return**

Note: The corporation may be required to file Schedule M-3 (see instructions)

1 Net income (loss) per books 2 Income included on Schedule K, lines 1, 2, 3c, 4, 5a, 6, 7, 8a, 9, and 10, not recorded on books this year (itemize): 3 Expenses recorded on books this year not included on Schedule K, lines 1 through 12 and 14I (itemize): a Depreciation \$ b Travel and entertainment \$ 4 Add lines 1 through 3	5 Income recorded on books this year not included on Schedule K, lines 1 through 10 (itemize): a Tax-exempt interest \$ 6 Deductions included on Schedule K, lines 1 through 12 and 14I, not charged against book income this year (itemize): a Depreciation \$ 7 Add lines 5 and 6 8 Income (loss) (Schedule K, line 18). Line 4 less line 7	
---	--	--

Schedule M-2**Analysis of Accumulated Adjustments Account, Other Adjustments Account, and Shareholders' Undistributed Taxable Income Previously Taxed** (see instructions)

	(a) Accumulated adjustments account	(b) Other adjustments account	(c) Shareholders' undistributed taxable income previously taxed
1 Balance at beginning of tax year	-12,868.		
2 Ordinary income from page 1, line 21			
3 Other additions			
4 Loss from page 1, line 21	()		
5 Other reductions	()	()	
6 Combine lines 1 through 5	-12,868.		
7 Distributions other than dividend distributions			
8 Balance at end of tax year. Subtract line 7 from line 6	-12,868.		

JWA

Form **1120S** (2017)

Rental Real Estate Income and Expenses of a Partnership or an S Corporation

▶ Attach to Form 1065, Form 1065-B, or Form 1120S.
▶ Go to www.irs.gov/Form8825 for the latest information.

OMB No. 1545-0123

Name FINDETT REAL ESTATE CORPORATION	Employer identification number 43 0787463
--	---

1	Show the type and address of each property. For each rental real estate property listed, report the number of days rented at fair rental value and days with personal use. See instructions. See page 2 to list additional properties.			
	Physical address of each property - street, city, state, ZIP code	Type - Enter code 1-8; see page 2 for list	Fair Rental Days	Personal Use Days
A	8 GOVERNOR DRIVE			
B	ST. CHARLES, MO 63301-7311	8 - LAND & BUILDING		
C				
D				

		Properties			
		A	B	C	D
Rental Real Estate Income					
2 Gross rents	2				
Rental Real Estate Expenses					
3 Advertising	3				
4 Auto and travel	4				
5 Cleaning and maintenance	5				
6 Commissions	6				
7 Insurance	7				
8 Legal and other professional fees	8				
9 Interest	9				
10 Repairs	10				
11 Taxes	11				
12 Utilities	12				
13 Wages and salaries	13				
14 Depreciation (see instructions)	14				
15 Other (list) ▶	15				
16 Total expenses for each property. Add lines 3 through 15	16				
17 Income or (Loss) from each property. Subtract line 16 from line 2	17				

18a Total gross rents. Add gross rents from line 2, columns A through H	18a	
b Total expenses. Add total expenses from line 16, columns A through H	18b	()
19 Net gain (loss) from Form 4797, Part II, line 17, from the disposition of property from rental real estate activities	19	
20a Net income (loss) from rental real estate activities from partnerships, estates, and trusts in which this partnership or S corporation is a partner or beneficiary (from Schedule K-1)	20a	
b Identify below the partnerships, estates, or trusts from which net income (loss) is shown on line 20a. Attach a schedule if more space is needed:		
(1) Name	(2) Employer identification number	
21 Net rental real estate income (loss). Combine lines 18a through 20a. Enter the result here and on:	21	0.
• Form 1065 or 1120S: Schedule K, line 2, or		
• Form 1065-B: Part I, line 4		

1	Show the type and address of each property. For each rental real estate property listed, report the number of days rented at fair rental value and days with personal use. See instructions.			
	Physical address of each property - street, city, state, ZIP code	Type - Enter code 1-8; see below for list	Fair Rental Days	Personal Use Days
E				
F				
G				
H				

		Properties			
		E	F	G	H
Rental Real Estate Income					
2	Gross rents	2			
Rental Real Estate Expenses					
3	Advertising	3			
4	Auto and travel	4			
5	Cleaning and maintenance	5			
6	Commissions	6			
7	Insurance	7			
8	Legal and other professional fees	8			
9	Interest	9			
10	Repairs	10			
11	Taxes	11			
12	Utilities	12			
13	Wages and salaries	13			
14	Depreciation (see instructions)	14			
15	Other (list) ▶	15			
				
				
16	Total expenses for each property. Add lines 3 through 15	16			
17	Income or (Loss) from each property. Subtract line 16 from line 2	17			

Allowable Codes for Type of Property

- 1 - Single Family Residence
- 2 - Multi-Family Residence
- 3 - Vacation or Short-Term Rental
- 4 - Commercial
- 5 - Land
- 6 - Royalties
- 7 - Self-Rental
- 8 - Other (include description with the code on Form 8825 or on a separate statement)

JWA

Form **8825** (Rev. 9-2017)

SCHEDULE K	NET RENTAL REAL ESTATE INCOME (LOSS)		STATEMENT 1
DESCRIPTION	INCOME	EXPENSES	NET AMOUNT
LAND & BUILDING	0.	0.	0.
TOTAL NET AMOUNT TO SCHEDULE K, LINE 2	0.	0.	0.

Schedule K-1
(Form 1120S)

Department of the Treasury
Internal Revenue Service

For calendar year 2017, or tax
year beginning _____
ending _____

2017

☐ Final K-1 ☐ Amended K-1

OMB No. 1545-0123

Part III Shareholder's Share of Current Year Income, Deductions, Credits, and Other Items

Section 1231 Gains and Other Items			
1	Ordinary business income (loss)	13	Credits
2	Net rental real estate inc (loss)		
3	Other net rental income (loss)		
4	Interest income		
5a	Ordinary dividends		
5b	Qualified dividends	14	Foreign transactions
6	Royalties		
7	Net short-term capital gain (loss)		
8a	Net long-term capital gain (loss)		
8b	Collectibles (28%) gain (loss)		
8c	Unrecaptured sec 1250 gain		
9	Net section 1231 gain (loss)		
10	Other income (loss)	15	Alternative min tax (AMT) items
11	Section 179 deduction	16	Items affecting shareholder basis
12	Other deductions		
		17	Other information
*See attached statement for additional information			

*See attached statement for additional information.

Schedule of Activities

For calendar year 2017, or tax year beginning _____, 2017, and ending _____, _____

Name: **FINDETT REAL ESTATE CORPORATION**

I.D. Number: 43-0787463

For: GEORGE E. GARRISON

(b) (6)

Description of Activity	Activity Number 1	100% Disposed	Publicly Traded Partnership	Type Code * 8	Description LAND & BUILDING
	Activity -	1	Activity -		Activity -
Ordinary business income (loss)					
Net rental real estate income (loss)					
Other net rental income (loss)					
Interest income					
Dividends - Ordinary dividends					
- Qualified dividends					
Royalties					
Net short-term capital gain (loss)					
Net long-term capital gain (loss)					
- Collectibles (28%) gain (loss)					
- Unrecaptured Section 1250 gain					
Net section 1231 gain (loss)					
Other portfolio income					
Section 1256 contracts and straddles					
Other income					
Section 179 deduction					
Charitable contributions					
Portfolio deductions					
Investment interest expense					
Section 59(e)(2) expenditures					
Other deductions					
Net earnings from self-employment					
Gross farming or fishing income					
Gross nonfarm income					
LIH credit - Section 42(j)(5) partnerships					
- Other					
Qualified rehabilitation expenditures related to rental real estate					
Other rental credits					
Credits related to other rental activities					
Recapture of LIH credit - Section 42(j)(5) partnerships					
- Other					
Other credits					
Post-1986 depreciation adjustment					
Adjusted gain or loss					
Portion of adjusted gain/loss allocable to short-term gain/loss					
Portion of adjusted gain/loss allocable to long-term gain/loss					
Portion of adjusted gain/loss allocable to section 1231 gain/loss					
Depletion (other than oil and gas)					
Oil, gas and geothermal properties - gross income					
Oil, gas and geothermal properties - deductions					
Other AMT items					
Investment income					
Investment expenses					

- * 1 - Single Family Residence 5 - Land
2 - Multi-Family Residence 6 - Royalties
3 - Vacation or Short-Term Rental 7 - Self-Rental
4 - Commercial 8 - Other

2017 TAX RETURN FILING INSTRUCTIONS

MISSOURI FORM MO-1120S

FOR THE YEAR ENDING
DECEMBER 31, 2017

PREPARED FOR:

FINETT REAL ESTATE CORPORATION
PO BOX 960
ST. CHARLES, MO 63302-0960

PREPARED BY:

DIXON HUGHES GOODMAN LLP
P.O. BOX 25849
GREENVILLE, SC 29616

TO BE SIGNED AND DATED BY:

NOT APPLICABLE

AMOUNT OF TAX:

TOTAL TAX	\$	0
LESS: PAYMENTS AND CREDITS	\$	0
PLUS: OTHER AMOUNT	\$	0
PLUS: INTEREST AND PENALTIES	\$	0
NO PAYMENT REQUIRED	\$	

OVERPAYMENT:

NOT APPLICABLE

MAKE CHECK PAYABLE TO:

NOT APPLICABLE

MAIL TAX RETURN TO:

THE RETURN HAS BEEN PREPARED FOR ELECTRONIC FILING. IF YOU WISH TO HAVE IT TRANSMITTED TO THE MO DOR, PLEASE CONTACT OUR OFFICE AND WE WILL SUBMIT YOUR ELECTRONIC RETURN. DO NOT MAIL THE PAPER COPY OF THE RETURN.

RETURN MUST BE MAILED ON OR BEFORE:

RETURN FEDERAL FORM 8879-S TO US BY APRIL 17, 2018.

SPECIAL INSTRUCTIONS:

ENCLOSED IS A COPY OF SCHEDULE K-1 TO BE DISTRIBUTED TO THE SHAREHOLDER.

Form
MO-1120S Missouri Department of Revenue
2017 S-Corporation Income Tax Return

Department Use Only (MM/DD/YY)

Missouri Tax I.D. Number

Missouri S-Corporation Income Beginning (MM/DD/YY)

 Ending (MM/DD/YY)

Federal Employer I.D. Number

 Charter Number

Corporation Name **FINDETT REAL ESTATE CORPORATION**

Address **PO BOX 960**

City **ST. CHARLES** State **MO**

ZIP **63302-0960**



☐ Select this box if you have an approved federal extension. Attach a copy of the approved Federal Extension (Form 7004).

Select Applicable Boxes. Failure to select the address change box may result in mailings going to the last address on file.

☐ Amended Return ☐ Name Change ☐ Address Change ☐ Final Return and Close Account ☐ Bankruptcy

S-Corporation

1. Does the S corporation have any Missouri modifications? ☐ Yes ☒ No
If Yes, complete Lines 1-14 on pages 1 and 2, and the shareholder information on page 3.
2. Does the S corporation have any nonresident shareholders? ☐ Yes ☒ No
If Yes, complete Lines 1-14 on pages 1 and 2, the shareholder information on page 3, and **Form MO-NRS**.
3. Does the S corporation have income derived from sources other than Missouri? ☐ Yes ☒ No
If Yes, complete and attach **Form MO-MSS**.

S-Corporation Adjustments

Additions				
1a. State and local income taxes deducted on Federal Form 1120S	1a	<table border="1" style="width: 100px; height: 20px;"></table>	<table border="1" style="width: 20px; height: 20px; text-align: center;">.00</table>	
1b. Less: Kansas City & St. Louis earnings taxes. Enter Lines 1a less 1b on Line 1	1b	<table border="1" style="width: 100px; height: 20px;"></table>	<table border="1" style="width: 20px; height: 20px; text-align: center;">.00</table>	1 <table border="1" style="width: 100px; height: 20px;"></table> <table border="1" style="width: 20px; height: 20px; text-align: center;">.00</table>
2a. State and local bond interest (except Missouri)	2a	<table border="1" style="width: 100px; height: 20px;"></table>	<table border="1" style="width: 20px; height: 20px; text-align: center;">.00</table>	
2b. Less: related expenses (omit if less than \$500) Enter Line 2a less Line 2b on Line 2	2b	<table border="1" style="width: 100px; height: 20px;"></table>	<table border="1" style="width: 20px; height: 20px; text-align: center;">.00</table>	2 <table border="1" style="width: 100px; height: 20px;"></table> <table border="1" style="width: 20px; height: 20px; text-align: center;">.00</table>
3. <input type="checkbox"/> Partnership <input type="checkbox"/> Fiduciary <input type="checkbox"/> Other adjustments (list _____)	3	<table border="1" style="width: 100px; height: 20px;"></table>	<table border="1" style="width: 20px; height: 20px; text-align: center;">.00</table>	
4. Donations claimed for the Food Pantry Tax Credit deducted from federal taxable income, Section 135.647, RSMo	4	<table border="1" style="width: 100px; height: 20px;"></table>	<table border="1" style="width: 20px; height: 20px; text-align: center;">.00</table>	
5. Total of Lines 1 through 4	5	<table border="1" style="width: 100px; height: 20px;"></table>	<table border="1" style="width: 20px; height: 20px; text-align: center;">.00</table>	
Subtractions				
6a. Interest from exempt federal obligations	6a	<table border="1" style="width: 100px; height: 20px;"></table>	<table border="1" style="width: 20px; height: 20px; text-align: center;">.00</table>	
6b. Less: related expenses (omit if < \$500) Enter Line 6a less Line 6b on Line 6	6b	<table border="1" style="width: 100px; height: 20px;"></table>	<table border="1" style="width: 20px; height: 20px; text-align: center;">.00</table>	6 <table border="1" style="width: 100px; height: 20px;"></table> <table border="1" style="width: 20px; height: 20px; text-align: center;">.00</table>
7. Amount of any state income tax refund included in federal ordinary income	7	<table border="1" style="width: 100px; height: 20px;"></table>	<table border="1" style="width: 20px; height: 20px; text-align: center;">.00</table>	
8. Federally taxable - Missouri exempt obligations	8	<table border="1" style="width: 100px; height: 20px;"></table>	<table border="1" style="width: 20px; height: 20px; text-align: center;">.00</table>	

S-Corporation Adjustments

Subtractions (continued)

9. ☐ Partnership ☐ Fiduciary ☐ Build America and Recovery Zone Bond Interest

☐ Missouri Public-Private Transportation Act ☐ Other adjustments (list _____) 9 .00

10. Missouri depreciation basis adjustment (**Section 143.121.3(7), RSMo**) 10 .00

11. Depreciation recovery on qualified property that is sold (**Section 143.121.3(9), RSMo**) 11 .00

12. Total Subtractions - Add Lines 6 through 11 12 .00

13. Missouri S corporation adjustment - Net Addition - excess Line 5 over Line 12 13 .00

14. Missouri S corporation adjustment - Net Subtraction - excess Line 12 over Line 5 14 .00

15. Agriculture Disaster Relief (**Section 143.121.3(10), RSMo**) 15 .00

Department Use Only

Under penalties of perjury, I declare that the above information and any attached supplement is true, complete, and correct.

A R N S E
☐ ☐ ☐ ☐ ☐

I authorize the Director of Revenue or delegate to discuss my return and attachments with the preparer or any member of his or her firm, or if internally prepared, any member of the internal staff ☒ Yes ☐ No

Signature

Signature of Officer

Printed Name

Telephone Number

Date Signed (MM/DD/YY)

Preparer's Signature (Including Internal Preparer)

Preparer's FEIN, SSN, or PTIN

Telephone Number (864) 288-5544

Date Signed (MM/DD/YY)



17112021019

Corporation Name **FINDETT REAL ESTATE CORPORATION**

Missouri Tax I.D. Number **1 0 7 5 1 2 3 8**

Federal Employer I.D. Number **4 3 0 7 8 7 4 6 3**

Charter Number **0 0 1 0 5 4 6 8**

Allocation of Missouri S Corporation Adjustment to Shareholders

1. Name of each shareholder. All shareholders must be listed. Use attachment if necessary.		2. Select if shareholder is nonresident	3. Social Security Number				4. Shareholder's Share %	5. Shareholder's Adjustment <input type="checkbox"/> Addition <input type="checkbox"/> Subtraction	
a)		<input type="checkbox"/>							00
b)		<input type="checkbox"/>							00
c)		<input type="checkbox"/>							00
d)		<input type="checkbox"/>							00
e)		<input type="checkbox"/>							00
f)		<input type="checkbox"/>							00
g)		<input type="checkbox"/>							00
h)		<input type="checkbox"/>							00
i)		<input type="checkbox"/>							00
j)		<input type="checkbox"/>							00
k)		<input type="checkbox"/>							00
l)		<input type="checkbox"/>							00
m)		<input type="checkbox"/>							00
n)		<input type="checkbox"/>							00
o)		<input type="checkbox"/>							00
p)		<input type="checkbox"/>							00
q)		<input type="checkbox"/>							00
r)		<input type="checkbox"/>							00
s)		<input type="checkbox"/>							00
Total							100	%	00

Column 4 - Enter percentages from Federal Schedule K-1(s). Round percentages to whole numbers.

Column 5 - Enter Missouri S corporation adjustment from Form MO-1120S, Line 13 or 14, as total of Column 5. Multiply each percentage in Column 4 by the total in Column 5. Indicate at the top of Column 5 whether the adjustments are additions or subtractions. The amount after each shareholder's name in Column 5 must be reported as a modification by the shareholder on his or her **Form MO-1040**, Individual Income Tax Return, either as an addition to, or subtraction from, federal adjusted gross income.

Mail To: Refund or No Amount Due:
Missouri Department of Revenue
P.O. Box 700
Jefferson City, MO 65105-0700

Phone: (573) 751-4541
Fax: (573) 522-1721
E-mail: corporate@dor.mo.gov

Form MO-1120S (Revised 12-2017)

Visit <http://dor.mo.gov/business/corporate/> for additional information.



17112031019

MISSOURI SCHEDULE K-1 EQUIVALENT	Shareholder's Information For Calendar Year 2017, or Fiscal Year	2017
Beginning _____, and Ending _____		
SHAREHOLDER'S NAME, ADDRESS, AND ZIP CODE GEORGE E. GARRISON (b) (6)		SHAREHOLDER'S SS#: (b) (6) SHAREHOLDER NO. <u>1</u> PERCENTAGE <u>100.0000</u> RESIDENCY STATUS: RESIDENT <input checked="" type="checkbox"/> NONRESIDENT <input type="checkbox"/>
S CORPORATION NAME, ADDRESS, AND ZIP CODE FINDETT REAL ESTATE CORPORATION PO BOX 960 ST. CHARLES, MO 63302-0960		MITS/MO ID NO. <u>10751238</u> FEDERAL ID NO. <u>43-0787463</u>

PART I - DISTRIBUTIVE SHARE ITEMS

Shareholder Adjustment - Net Addition		Shareholder Adjustment - Net Subtraction ...	
---	--	--	--

PART II - DISTRIBUTIVE MISSOURI CREDITS

New or Expanded Business Facility Credit	
Development Reserve Credit	
Infrastructure Development Credit	
Export Finance Credit	
Missouri Low Income Housing Credit	
Missouri Business Modernization and Technology (Seed Capital) Credit	
Neighborhood Assistance Credit	
Affordable Housing Assistance Credit	
Enterprise Zone Credit	
Small Business Incubator Credit	
Small Business Investment (Capital) Credit	
Community Bank Investment Credit	
Qualified Research Expense Credit	
Special Needs Adoption Credit	
Brownfield Jobs and Investment Credit	
Youth Opportunities Credit	
Processed Wood Energy Credit	
Missouri Business Use Incentives for Large-Scale Development (BUILD) Credit	
Maternity Home Credit	
Shelter for Victims of Domestic Violence Credit	
Historic Preservation Credit	
New Market Tax Credit	
Charcoal Producers Credit	
Film Production Credit	
Wine and Grape Production Credit	
Rebuilding Communities Credit	
Agricultural Product Utilization Contributor Credit	
New Generation Cooperative Incentive Credit	
Bank Tax Credit for S Corporation shareholders	
Family Development Account Credit	
New Enterprise Creation Credit	
Remediation Credit	
Rebuilding Communities and Neighborhood Preservation Act Credit	
Disabled Access Credit	
Bank Franchise Tax Credit	
Developmental Disability Care Provider Credit	
Transportation Development Credit	
Development Tax Credit	
Small Business Guaranty Fees Credit	
Bond Enhancement Credit	
Missouri Quality Jobs Credit	
New Enhanced Enterprise Zone Credit	

MISSOURI SCHEDULE K-1 EQUIVALENT

PART II - DISTRIBUTIVE MISSOURI CREDITS - CONTINUED

Dry Fire Hydrant Credit	
Champion for Children Credit	
Food Pantry Tax Credit	
Family Farms Act Credit	
Pregnancy Resource Credit	
Residential Treatment Agency Credit	
Distressed Area Land Assemblage Credit	
Qualified Beef Credit	
Alternative Fuel Infrastructure Credit	
Missouri Works Credit	
Sporting Event Credit	
Sporting Contribution Credit	

DIXON HUGHES GOODMAN LLP
P.O. BOX 25849
GREENVILLE, SC 29616

FINDETT REAL ESTATE CORPORATION
PO BOX 960
ST. CHARLES, MO 63302-0960

|||||

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CLIENT'S COPY



September 11, 2019

Findett Real Estate Corporation
PO Box 960
St. Charles, MO 63302-0960

Dear George:

On behalf of our team at Dixon Hughes Goodman LLP (DHG), we would like to express our deepest gratitude for allowing us to assist you with your 2018 tax reporting needs. Our mission, as always, is to help our clients achieve their goals and to do so as forthrightly and candidly as possible. Enclosed you will find your completed 2018 tax returns.

Tax Return Summary:

Jurisdiction- Form		Filing Method	Refund/Balance Due	Amount
Federal 1120S		E-File	NA	NA
Missouri MO-1120S	Main	E-File	NA	NA

Information Provided:

- **ACTION ITEMS:** The documents enclosed will need to be signed and returned to DHG's office, or mailed to the appropriate taxing authority by the due date indicated on the filing instructions. If your returns are to be filed electronically, they will not be filed until the signed documents are received by our office. Partner/Shareholder K-1s are included to be distributed to appropriate parties.
- **2018 TAX RETURNS:** Included are copies of your returns and supporting documents you may have furnished.

Your tax returns were prepared from information provided by you, without additional verification by DHG. Upon examination, taxing authorities may request additional information. DHG strongly recommends that you preserve all original source documents and other supporting information in the event of such requests. We also advise you to retain a copies of your 2018 returns, indefinitely.

Please note that the tax advice DHG has provided above and within this package, in connection with the preparation of your U.S. federal tax return, is not intended or written to be used by any taxpayer for the purpose of avoiding penalties that may be imposed on the taxpayer by the Internal Revenue Service.

Comprehensive Resources Available to You

With new legislation and the most extensive tax reform in more than 30 years, DHG understands you may have questions regarding the numerous changes to the Internal Revenue Code. We urge you to reach

out to our team to find up-to-date, innovative industry insights at www.dhg.com/tax, by clicking on "Tax Reform & Recent Developments".

We Welcome Your Feedback:

We value our relationship with you and thank you for the opportunity to be of service to you and your continued success. We would appreciate if you would take a few minutes to let us know if we met your expectations by visiting www.dhg.com/taxsurvey. The questionnaire takes less than five minutes to complete, and the feedback we receive is used for the continuous improvement of our services.

If you have further questions on any details contained in this letter, or on any other matter, please do not hesitate to contact us.

Warm Regards,

James F. Tenpas

Dixon Hughes Goodman LLP

2018 TAX RETURN FILING INSTRUCTIONS

U.S. INCOME TAX RETURN FOR AN S CORPORATION

FOR THE YEAR ENDING

December 31, 2018

Prepared For:

Findett Real Estate Corporation
PO Box 960
St. Charles, MO 63302-0960

Prepared By:

Dixon Hughes Goodman LLP
P.O. Box 25849
Greenville, SC 29616

To Be Signed and Dated By:

The appropriate corporate officer(s).

Amount of Tax:

Total tax	\$	0
Less: payments and credits	\$	0
Plus: interest and penalties	\$	0
No payment required	\$	

Overpayment:

Not applicable

Make Check Payable To:

Not applicable

Mail Tax Return and Check (if applicable) To:

This return has been prepared for electronic filing. To have it transmitted electronically to the IRS, please sign, date and return Form 8879-S to our office. We will then submit your electronic return.

Return Must be Mailed On or Before:

Return federal Form 8879-S to us by September 16, 2019.

Special Instructions:

Enclosed is a copy of Schedule K-1 to be distributed to the shareholder.

Number 1	Number
Name: GEORGE E.	Name:
GARRISON	K-1 TOTALS

[illegible]

S CORPORATION
Two-Year Comparison

2018

Name	Employer Identification Number
FINDETT REAL ESTATE CORPORATION	43-0787463

Description	Prior Year	Current Year	Increase (Decrease)
ORDINARY BUSINESS INCOME (LOSS):			
INCOME:			
DEDUCTIONS:			
S CORPORATION TAXES:			
PAYMENTS AND CREDITS:			
BALANCE DUE OR REFUND:			
SCHEDULE K:			
INCOME:			
DEDUCTIONS:			
INVESTMENT INTEREST:			
CREDITS:			
FOREIGN TAXES:			
AMT ITEMS:			
OTHER SCHEDULE K ITEMS:			
SCHEDULE M-1:			
SCHEDULE M-2:			
ACCUMULATED ADJUSTMENTS ACCOUNT:			
BALANCE AT BEGINNING OF TAX YEAR	-12,868.	-12,868.	
COMBINE LINES 1 THROUGH 5	-12,868.	-12,868.	
BALANCE AT END OF TAX YEAR	-12,868.	-12,868.	

U.S. Income Tax Return for an S Corporation

▶ Do not file this form unless the corporation has filed or is attaching Form 2553 to elect to be an S corporation.
▶ Go to www.irs.gov/Form1120S for instructions and the latest information.

OMB No. 1545-0123

2018**For calendar year 2018 or tax year beginning** , **and ending**

A S election effective date 01/01/2004	TYPE OR PRINT	Name FINDETT REAL ESTATE CORPORATION	D Employer identification number 43-0787463
B Business activity code number (see instructions) 531390		Number, street, and room or suite no. If a P.O. box, see instructions. PO BOX 960	E Date incorporated 04/23/1962
C Check if Sch. M-3 attached <input type="checkbox"/>		City or town, state or province, country, and ZIP or foreign postal code ST. CHARLES, MO 63302-0960	F Total assets (see instructions) \$ 14,095.
G Is the corporation electing to be an S corporation beginning with this tax year? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes," attach Form 2553 if not already filed			
H Check if: (1) <input type="checkbox"/> Final return (2) <input type="checkbox"/> Name change (3) <input type="checkbox"/> Address change (4) <input type="checkbox"/> Amended return (5) <input type="checkbox"/> S election termination or revocation			
I Enter the number of shareholders who were shareholders during any part of the tax year 1			

Caution: Include only trade or business income and expenses on lines 1a through 21. See the instructions for more information.

Income	1 a Gross receipts or sales	b Return and allowances	c Bal. Subtract line 1b from line 1a	1c
	2 Cost of goods sold (attach Form 1125-A)			2
	3 Gross profit. Subtract line 2 from line 1c			3
	4 Net gain (loss) from Form 4797, line 17 (attach Form 4797)			4
	5 Other income (loss) (attach statement)			5
	6 Total income (loss). Add lines 3 through 5			6
Deductions (See instructions for limitations)	7 Compensation of officers (see instrs. - attach Form 1125-E)			7
	8 Salaries and wages (less employment credits)			8
	9 Repairs and maintenance			9
	10 Bad debts			10
	11 Rents			11
	12 Taxes and licenses			12
	13 Interest (see instructions)			13
	14 Depreciation not claimed on Form 1125-A or elsewhere on return (attach Form 4562)			14
	15 Depletion (Do not deduct oil and gas depletion.)			15
	16 Advertising			16
	17 Pension, profit-sharing, etc., plans			17
	18 Employee benefit programs			18
	19 Other deductions (attach statement)			19
	20 Total deductions. Add lines 7 through 19			20
	21 Ordinary business income (loss). Subtract line 20 from line 6			21 0.
Tax and Payments	22 a Excess net passive income or LIFO recapture tax (see instructions)	22a		22c
	b Tax from Schedule D (Form 1120S)	22b		
	c Add lines 22a and 22b			
	23 a 2018 estimated tax payments and 2017 overpayment credited to 2018	23a		23e
	b Tax deposited with Form 7004	23b		
	c Credit for federal tax paid on fuels (attach Form 4136)	23c		
	d Refundable credit from Form 8827, line 8c	23d		
	e Add lines 23a through 23d			
	24 Estimated tax penalty (see instructions). Check if Form 2220 is attached <input type="checkbox"/>			24
	25 Amount owed. If line 23e is smaller than the total of lines 22c and 24, enter amount owed			25
	26 Overpayment. If line 23e is larger than the total of lines 22c and 24, enter amount overpaid			26
27 Enter amount from line 26: Credited to 2019 estimated tax Refunded			27	

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Sign Here ▶ Signature of officer **PARTNER** Title

May the IRS discuss this return with the preparer shown below (see instr.)?
☒ Yes ☐ No

Print/Type preparer's name JAMES F. TENPAS	Preparer's signature	Date	Check if self-employed <input type="checkbox"/>	PTIN P00688810
Firm's name ▶ DIXON HUGHES GOODMAN LLP	Firm's EIN ▶ 56-0747981			
Firm's address ▶ P.O. BOX 25849 GREENVILLE, SC 29616	Phone no. (864) 288-5544			

Schedule B Other Information (see instructions)					Yes	No
1 Check accounting method: (a) <input type="checkbox"/> Cash (b) <input checked="" type="checkbox"/> Accrual (c) <input type="checkbox"/> Other (specify) ▶						
2 See the instructions and enter the:						
(a) Business activity ▶ REAL ESTATE (b) Product or service ▶ REAL ESTATE INVESTME						
3 At any time during the tax year, was any shareholder in the corporation a disregarded entity, a trust, an estate, or a nominee or similar person? If "Yes," attach Schedule B-1, Information on Certain Shareholders of an S Corporation						X
4 At the end of the tax year, did the corporation:						
a Own directly 20% or more, or own, directly or indirectly, 50% or more of the total stock issued and outstanding of any foreign or domestic corporation? For rules of constructive ownership, see instructions. If "Yes," complete (i) through (v) below						X
(i) Name of Corporation	(ii) Employer Identification Number (if any)	(iii) Country of incorporation	(iv) Percentage of Stock Owned	(v) If Percentage in (iv) is 100%. Enter the Date (if any) a Qualified Subchapter S Subsidiary Election Was Made		
b Own directly an interest of 20% or more, or own, directly or indirectly, an interest of 50% or more in the profit, loss, or capital in any foreign or domestic partnership (including an entity treated as a partnership) or in the beneficial interest of a trust? For rules of constructive ownership, see instructions. If "Yes," complete (i) through (v) below						X
(i) Name of Entity	(ii) Employer Identification Number (if any)	(iii) Type of Entity	(iv) Country of Organization	(v) Maximum Percentage Owned in Profit, Loss, or Capital		
5a At the end of the tax year, did the corporation have any outstanding shares of restricted stock?						X
If "yes" complete lines (i) and (ii) below						
(i) Total shares of restricted stock ▶						
(ii) Total shares of non-restricted stock ▶						
b At the end of the tax year, did the corporation have any outstanding stock options, warrants, or similar instruments?						X
If "yes" complete lines (i) and (ii) below						
(i) Total shares of stock outstanding at the end of the tax year ▶						
(ii) Total shares of stock outstanding if all instruments were executed ▶						
6 Has this corporation filed, or is it required to file, Form 8918, Material Advisor Disclosure Statement, to provide info. on any reportable transaction? ...						X
7 Check this box if the corporation issued publicly offered debt instruments with original issue discount ▶ <input type="checkbox"/>						
If checked, the corporation may have to file Form 8281, Information Return for Publicly Offered Original Issue Discount Instruments.						
8 If the corporation (a) was a C corporation before it elected to be an S corporation or the corporation acquired an asset with a basis determined by reference to the basis of the asset (or the basis of any other property) in the hands of a C corporation and (b) has net unrealized built-in gain in excess of the net recognized built-in gain from prior years, enter the net unrealized built-in gain reduced by net recognized built-in gain from prior years ▶ \$						
9 Did the corporation have an election under section 163(j) for any real property trade or business or any farming business in effect during the tax year? See instructions						X
10 Does the corporation satisfy one of the following conditions and the corporation doesn't own a pass-through entity with current year, or prior year carryover, excess business interest expense? See instructions					X	
a The corporation's aggregate average annual gross receipts (determined under section 448(c)) for the 3 tax years preceding the current tax year don't exceed \$25 million, and the corporation isn't a tax shelter; or						
b The corporation only has business interest expense from (1) an electing real property trade or business, (2) an electing farming business, or (3) certain utility businesses under section 163(j)(7). If "No," complete and attach Form 8990.						
11 Does the corporation satisfy both of the following conditions?						
a The corporation's total receipts (see instructions) for the tax year were less than \$250,000						
b The corporation's total assets at the end of the tax year were less than \$250,000					X	
If "Yes," the corporation is not required to complete Schedules L and M-1.						

Schedule B Other Information (see instructions) (continued)	Yes	No
12 During the tax year, did the corporation have any non-shareholder debt that was canceled, was forgiven, or had the terms modified so as to reduce the principal amount of the debt? If "Yes," enter the amount of principal reduction ▶ \$ _____		X
13 During the tax year, was a qualified subchapter S subsidiary election terminated or revoked? If "Yes," see instructions		X
14a Did the corporation make any payments in 2018 that would require it to file Form(s) 1099?		X
b If "Yes," did the corporation file or will it file all required Forms 1099?		
15 Is the corporation attaching Form 8996 to certify as a Qualified Opportunity Fund?		X
If "Yes," enter the amount from Form 8996, line 13 ▶ \$ _____		

Schedule K Shareholders' Pro Rata Share Items		Total amount	
Income (Loss)	1 Ordinary business income (loss) (page 1, line 21)	1	
	2 Net rental real estate income (loss) (attach Form 8825) STATEMENT 1	2	
	3a Other gross rental income (loss) 3a		
	b Expenses from other rental activities (attach statement) 3b		
	c Other net rental income (loss). Subtract line 3b from line 3a	3c	
	4 Interest income	4	
	5 Dividends: a Ordinary dividends	5a	
	b Qualified dividends 5b		
	6 Royalties	6	
	7 Net short-term capital gain (loss) (attach Schedule D (Form 1120S))	7	
Deductions	8a Net long-term capital gain (loss) (attach Schedule D (Form 1120S))	8a	
	b Collectibles (28%) gain (loss) 8b		
	c Unrecaptured section 1250 gain (attach statement) 8c		
	9 Net section 1231 gain (loss) (attach Form 4797)	9	
	10 Other income (loss) (see instructions) ... Type ▶	10	
	11 Section 179 deduction (attach Form 4562)	11	
	12a Charitable contributions	12a	
	b Investment interest expense	12b	
	c Section 59(e)(2) expenditures (1) Type ▶ (2) Amount ▶	12c(2)	
	d Other deductions (see instructions) Type ▶	12d	
Credits	13a Low-income housing credit (section 42(j)(5))	13a	
	b Low-income housing credit (other)	13b	
	c Qualified rehabilitation expenditures (rental real estate) (attach Form 3468)	13c	
	d Other rental real estate credits (see instructions) Type ▶	13d	
	e Other rental credits (see instructions) Type ▶	13e	
	f Biofuel producer credit (attach Form 6478)	13f	
	g Other credits (see instructions) Type ▶	13g	
Foreign Transactions	14a Name of country or U.S. possession ▶		
	b Gross income from all sources	14b	
	c Gross income sourced at shareholder level Foreign gross income sourced at corporate level	14c	
	d Section 951A category	14d	
	e Foreign branch category	14e	
	f Passive category	14f	
	g General category	14g	
	h Other (attach statement) Deductions allocated and apportioned at shareholder level	14h	
	i Interest expense	14i	
	j Other Deductions allocated and apportioned at corporate level to foreign source income	14j	
	k Section 951A category	14k	
	l Foreign branch category	14l	
	m Passive category	14m	
	n General category	14n	
	o Other (attach statement) Other information	14o	
	p Total foreign taxes (check one): ▶ <input type="checkbox"/> Paid <input type="checkbox"/> Accrued	14p	
	q Reduction in taxes available for credit (attach statement)	14q	
	r Other foreign tax information (attach statement)		

Schedule K Shareholders' Pro Rata Share Items (continued)		Total amount
Alternative Minimum Tax (AMT) Items	15a Post-1986 depreciation adjustment	15a
	b Adjusted gain or loss	15b
	c Depletion (other than oil and gas)	15c
	d Oil, gas, and geothermal properties - gross income	15d
	e Oil, gas, and geothermal properties - deductions	15e
	f Other AMT items (attach statement)	15f
Items Affecting Shareholder Basis	16a Tax-exempt interest income	16a
	b Other tax-exempt income	16b
	c Nondeductible expenses	16c
	d Distributions (attach statement if required)	16d
	e Repayment of loans from shareholders	16e
Other Information	17a Investment income	17a
	b Investment expenses	17b
	c Dividend distributions paid from accumulated earnings and profits	17c
	d Other items and amounts (att. stmt.)	
Reconciliation	18 Income/loss reconciliation. Combine the amounts on lines 1 through 10 in the far right column. From the result, subtract the sum of the amounts on lines 11 through 12d and 14p	18

Schedule L Balance Sheets per Books		Beginning of tax year		End of tax year	
Assets		(a)	(b)	(c)	(d)
1	Cash				
2 a	Trade notes and accounts receivable				
b	Less allowance for bad debts	()	()		
3	Inventories				
4	U.S. government obligations				
5	Tax-exempt securities				
6	Other current assets (att. stmt.)				
7	Loans to shareholders				
8	Mortgage and real estate loans				
9	Other investments (att. stmt.)				
10 a	Buildings and other depreciable assets				
b	Less accumulated depreciation	()	()		
11 a	Depletable assets				
b	Less accumulated depletion	()	()		
12	Land (net of any amortization)		14,095.		14,095.
13 a	Intangible assets (amortizable only)	150,000.		150,000.	
b	Less accumulated amortization	(150,000.)	0.	(150,000.)	0.
14	Other assets (att. stmt.)				
15	Total assets		14,095.		14,095.
Liabilities and Shareholders' Equity					
16	Accounts payable				
17	Mortgages, notes, bonds payable in less than 1 year				
18	Other current liabilities (att. stmt.)				
19	Loans from shareholders				
20	Mortgages, notes, bonds payable in 1 year or more				
21	Other liabilities (att. stmt.)				
22	Capital stock		13,248.		13,248.
23	Additional paid-in capital		8,175.		8,175.
24	Retained earnings		2,431,599.		2,431,599.
25	Adjustments to shareholders' equity (att. stmt.)				
26	Less cost of treasury stock		(2,438,927.)		(2,438,927.)
27	Total liabilities and shareholders' equity		14,095.		14,095.

JWA

Form 1120S (2018)

Schedule M-1**Reconciliation of Income (Loss) per Books With Income (Loss) per Return**

Note: The corporation may be required to file Schedule M-3 (see instructions)

1 Net income (loss) per books		5 Income recorded on books this year not included on Schedule K, lines 1 through 10 (itemize): a Tax-exempt interest \$	
2 Income included on Schedule K, lines 1, 2, 3c, 4, 5a, 6, 7, 8a, 9, and 10, not recorded on books this year (itemize):		6 Deductions included on Schedule K, lines 1 through 12 and 14p, not charged against book income this year (itemize): a Depreciation \$	
3 Expenses recorded on books this year not included on Schedule K, lines 1 through 12 and 14p (itemize): a Depreciation \$		7 Add lines 5 and 6	
b Travel and entertainment \$		8 Income (loss) (Schedule K, line 18). Line 4 less line 7	
4 Add lines 1 through 3			

Schedule M-2**Analysis of Accumulated Adjustments Account, Shareholders' Undistributed Taxable Income Previously Taxed, Accumulated Earnings and Profits, and Other Adjustments Account** (see instrs.)

	(a) Accumulated adjustments account	(b) Shareholders' undistributed taxable income previously taxed	(c) Accumulated earnings and profits	(d) Other adjustments account
1 Balance at beginning of tax year	-12,868.			
2 Ordinary income from page 1, line 21				
3 Other additions				
4 Loss from page 1, line 21	()			
5 Other reductions	()			()
6 Combine lines 1 through 5	-12,868.			
7 Distributions				
8 Balance at end of tax year. Subtract line 7 from line 6	-12,868.			

JWA

Form **1120S** (2018)

**Rental Real Estate Income and Expenses of a
Partnership or an S Corporation**

▶ Attach to Form 1065 or Form 1120S.
▶ Go to www.irs.gov/Form8825 for the latest information.

OMB No. 1545-0123

Name	FINDETT REAL ESTATE CORPORATION	Employer identification number	43 0787463
------	---------------------------------	--------------------------------	------------

1	Show the type and address of each property. For each rental real estate property listed, report the number of days rented at fair rental value and days with personal use. See instructions. See page 2 to list additional properties.			
	Physical address of each property - street, city, state, ZIP code	Type - Enter code 1-8; see page 2 for list	Fair Rental Days	Personal Use Days
A	8 GOVERNOR DRIVE			
B	ST. CHARLES, MO 63301-7311	8 - LAND & BUILDING		
C				
D				

		Properties			
		A	B	C	D
Rental Real Estate Income					
2 Gross rents	2				
Rental Real Estate Expenses					
3 Advertising	3				
4 Auto and travel	4				
5 Cleaning and maintenance	5				
6 Commissions	6				
7 Insurance	7				
8 Legal and other professional fees	8				
9 Interest	9				
10 Repairs	10				
11 Taxes	11				
12 Utilities	12				
13 Wages and salaries	13				
14 Depreciation (see instructions)	14				
15 Other (list) ▶	15				
16 Total expenses for each property. Add lines 3 through 15	16				
17 Income or (Loss) from each property. Subtract line 16 from line 2	17				

18a Total gross rents. Add gross rents from line 2, columns A through H	18a	
b Total expenses. Add total expenses from line 16, columns A through H	18b	()
19 Net gain (loss) from Form 4797, Part II, line 17, from the disposition of property from rental real estate activities	19	
20a Net income (loss) from rental real estate activities from partnerships, estates, and trusts in which this partnership or S corporation is a partner or beneficiary (from Schedule K-1)	20a	
b Identify below the partnerships, estates, or trusts from which net income (loss) is shown on line 20a. Attach a schedule if more space is needed:		
(1) Name	(2) Employer identification number	
21 Net rental real estate income (loss). Combine lines 18a through 20a. Enter the result here and on:	21	0.
• Form 1065 or 1120S: Schedule K, line 2		

For Paperwork Reduction Act Notice, see instructions.

820141
11-15-18 JWA

Form 8825 (Rev. 11-2018)

1	Show the type and address of each property. For each rental real estate property listed, report the number of days rented at fair rental value and days with personal use. See instructions.			
	Physical address of each property - street, city, state, ZIP code	Type - Enter code 1-8; see below for list	Fair Rental Days	Personal Use Days
E				
F				
G				
H				

		Properties			
		E	F	G	H
Rental Real Estate Income					
2	Gross rents	2			
Rental Real Estate Expenses					
3	Advertising	3			
4	Auto and travel	4			
5	Cleaning and maintenance	5			
6	Commissions	6			
7	Insurance	7			
8	Legal and other professional fees	8			
9	Interest	9			
10	Repairs	10			
11	Taxes	11			
12	Utilities	12			
13	Wages and salaries	13			
14	Depreciation (see instructions)	14			
15	Other (list) ▶	15			
				
				
16	Total expenses for each property. Add lines 3 through 15	16			
17	Income or (Loss) from each property. Subtract line 16 from line 2	17			

Allowable Codes for Type of Property

- 1 - Single Family Residence
- 2 - Multi-Family Residence
- 3 - Vacation or Short-Term Rental
- 4 - Commercial
- 5 - Land
- 6 - Royalties
- 7 - Self-Rental
- 8 - Other (include description with the code on Form 8825 or on a separate statement)

JWA

Form **8825** (Rev. 11-2018)

SCHEDULE K	NET RENTAL REAL ESTATE INCOME (LOSS)		STATEMENT 1
DESCRIPTION	INCOME	EXPENSES	NET AMOUNT
LAND & BUILDING	0.	0.	0.
TOTAL NET AMOUNT TO SCHEDULE K, LINE 2	0.	0.	0.

Schedule K-1
(Form 1120S)

Department of the Treasury
Internal Revenue Service

For calendar year 2018, or tax
year beginning _____
ending _____

2018

☐ Final K-1 ☐ Amended K-1

OMB No. 1545-0123

Part III Shareholder's Share of Current Year Income, Deductions, Credits, and Other Items

Deductions, Credits, and Other Items			
1	Ordinary business income (loss)	13	Credits
2	Net rental real estate inc (loss)		
3	Other net rental income (loss)		
4	Interest income		
5a	Ordinary dividends		
5b	Qualified dividends	14	Foreign transactions
6	Royalties		
7	Net short-term capital gain (loss)		
8a	Net long-term capital gain (loss)		
8b	Collectibles (28%) gain (loss)		
8c	Unrecaptured sec 1250 gain		
9	Net section 1231 gain (loss)		
10	Other income (loss)	15	Alternative min tax (AMT) items
11	Section 179 deduction	16	Items affecting shareholder basis
12	Other deductions		
		17	Other information
*See attached statement for additional information			

Shareholder's Share of Income, Deductions, Credits, etc. ▶ See separate instructions.

► See separate instructions.

Part I Information About the Corporation

A Corporation's employer identification number
43-0787463

B Corporation's name, address, city, state, and ZIP code

FINDETT REAL ESTATE CORPORATION
PO BOX 960
ST. CHARLES, MO 63302-0960

C IRS Center where corporation filed return
E-FILE

Part II Information About the Shareholder

D Shareholder's identifying number
(b) (6)

E Shareholder's name, address, city, state and ZIP code

GEORGE E. GARRISON
(b) (6)

F	Shareholder's percentage of stock ownership for tax year	100.000000 %
---	--	--------------

For IRS Use Only

*See attached statement for additional information.

Schedule of Activities

For calendar year 2018, or tax year beginning

, 2018, and ending

FINDETT REAL ESTATE CORPORATION

43-0787463

Name: GEORGE E. GARRISON

(b) (6)

For:

Description of Activity	Activity Number	100% Disposed	Publicly Traded Partnership	Type Code *	Description
	1			8	LAND & BUILDING

	Activity - 1	Activity -	Activity -
Ordinary business income (loss)			
Net rental real estate income (loss)			
Other net rental income (loss)			
Interest income			
Dividends - Ordinary dividends			
- Qualified dividends			
- Dividend equivalents (1065 only)			
Royalties			
Net short-term capital gain (loss)			
Net long-term capital gain (loss)			
- Collectibles (28%) gain (loss)			
- Unrecaptured Section 1250 gain			
Net section 1231 gain (loss)			
Other portfolio income			
Section 1256 contracts and straddles			
Other income			
Section 179 deduction			
Charitable contributions			
Portfolio deductions			
Investment interest expense			
Section 59(e)(2) expenditures			
Excess business interest expense			
Other deductions			
Net earnings from self-employment			
Gross farming or fishing income			
Gross nonfarm income			
LIH credit - Section 42(j)(5) partnerships			
- Other			
Qualified rehabilitation expenditures related to rental real estate			
Other rental credits			
Credits related to other rental activities			
Recapture of LIH credit - Section 42(j)(5) partnerships			
- Other			
Other credits			
Post-1986 depreciation adjustment			
Adjusted gain or loss			
Portion of adjusted gain/loss allocable to short-term gain/loss			
Portion of adjusted gain/loss allocable to long-term gain/loss			
Portion of adjusted gain/loss allocable to section 1231 gain/loss			
Depletion (other than oil and gas)			
Oil, gas and geothermal properties - gross income			
Oil, gas and geothermal properties - deductions			
Other AMT items			
Investment income			
Investment expenses			
Section 199A - Qualified business income			
- Specified service income			
- W-2 wages			
- Unadjusted basis of assets			
- PTP income			

2018 TAX RETURN FILING INSTRUCTIONS

MISSOURI FORM MO-1120S

FOR THE YEAR ENDING

December 31, 2018

Prepared For:

Findett Real Estate Corporation
PO Box 960
St. Charles, MO 63302-0960

Prepared By:

Dixon Hughes Goodman LLP
P.O. Box 25849
Greenville, SC 29616

To be Signed and dated by:

Not applicable

Amount of Tax:

Total tax	\$	0
Less: payments and credits	\$	0
Plus: other amount	\$	0
Plus: interest and penalties	\$	0
No payment required	\$	

Overpayment:

Not applicable

Make Check Payable To:

Not applicable

Mail Tax Return To:

The return has been prepared for electronic filing. If you wish to have it transmitted to the MO DOR, please contact our office and we will submit your electronic return. Do not mail the paper copy of the return.

Return Must Be Mailed On or Before:

Return federal Form 8879-S to us by October 15, 2019.

Special Instructions:

Enclosed is a copy of Schedule K-1 to be distributed to the shareholder.

Form
MO-1120S

Missouri Department of Revenue
2018 S-Corporation Income Tax Return

Department Use Only
(MM/DD/YY)

Missouri Tax
I.D. Number

1	0	7	5	1	2	3	8

Missouri S-Corporation Income Beginning
Tax Return for 2018 (MM/DD/YY)

0	1	0	1	1	8
---	---	---	---	---	---

Ending
(MM/DD/YY)

1	2	3	1	1	8
---	---	---	---	---	---

Federal Employer
I.D. Number

4	3	0	7	8	7	4	6	3
---	---	---	---	---	---	---	---	---

Charter
Number

0	0	1	0	5	4	6	8		
---	---	---	---	---	---	---	---	--	--

Corporation
Name

FINDETT REAL ESTATE CORPORATION

Address

PO BOX 960

City

ST. CHARLES

State

MO

ZIP

63302-0960



18112011019

☐ Select this box if you have an approved federal extension. Attach a copy of the approved Federal Extension (Form 7004).

Select Applicable Boxes. Failure to select the address change box may result in mailings going to the last address on file.

☐ Amended Return ☐ Name Change ☐ Address Change ☐ Final Return and Close Account ☐ Bankruptcy

S-Corporation

- Does the S corporation have any Missouri modifications? ☐ Yes ☒ No
If Yes, complete Lines 1-14 on pages 1 and 2, and the shareholder information on page 3.
- Does the S corporation have any nonresident shareholders? ☐ Yes ☒ No
If Yes, complete Lines 1-14 on pages 1 and 2, the shareholder information on page 3, and **Form MO-NRS**.
- Does the S corporation have income derived from sources other than Missouri? ☐ Yes ☒ No
If Yes, complete and attach **Form MO-MSS**.

S-Corporation Adjustments

Additions

- 1a. State and local income taxes deducted on Federal Form 1120S

1a		.00
----	--	-----
- 1b. Less: Kansas City & St. Louis earnings taxes. Enter Lines 1a less 1b
on Line 1

1b		.00	1		.00
----	--	-----	---	--	-----
- 2a. State and local bond interest (except Missouri)

2a		.00
----	--	-----
- 2b. Less: related expenses (omit if less than \$500)
Enter Line 2a less Line 2b on Line 2

2b		.00	2		.00
----	--	-----	---	--	-----
3. ☐ Partnership ☐ Fiduciary ☐ Other adjustments (list

3		.00
---	--	-----
4. Donations claimed for the Food Pantry Tax Credit deducted from federal taxable income,
Section 135.647, RSMo

4		.00
---	--	-----
5. Total of Lines 1 through 4

5		.00
---	--	-----

Subtractions

- 6a. Interest from exempt federal obligations

6a		.00
----	--	-----
- 6b. Less: related expenses (omit if < \$500) Enter Line 6a less Line 6b
on Line 6

6b		.00	6		.00
----	--	-----	---	--	-----
7. Amount of any state income tax refund included in federal ordinary income

7		.00
---	--	-----
8. Federally taxable - Missouri exempt obligations

8		.00
---	--	-----

S-Corporation Adjustments

Subtractions (continued)

9.	<input type="checkbox"/> Partnership	<input type="checkbox"/> Fiduciary	<input type="checkbox"/> Build America and Recovery Zone Bond Interest			
	<input type="checkbox"/> Missouri Public-Private Transportation Act	<input type="checkbox"/> Other adjustments (list _____)		9		.00
10.	Missouri depreciation basis adjustment (Section 143.121.3(7), RSMo)			10		.00
11.	Depreciation recovery on qualified property that is sold (Section 143.121.3(9), RSMo)			11		.00
12.	Total Subtractions - Add Lines 6 through 11			12		.00
13.	Missouri S corporation adjustment - Net Addition - excess Line 5 over Line 12			13		.00
14.	Missouri S corporation adjustment - Net Subtraction - excess Line 12 over Line 5			14		.00
15.	Agriculture Disaster Relief (Section 143.121.3(10), RSMo)			15		.00

Department Use Only

Under penalties of perjury, I declare that the above information and any attached supplement is true, complete, and correct.

A	R	N	S	E
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

I authorize the Director of Revenue or delegate to discuss my return and attachments with the preparer or any member of his or her firm, or if internally prepared, any member of the internal staff ☒ Yes ☐ No

Signature

Signature of Officer

Printed Name

Telephone Number

Date Signed (MM/DD/YY)

Preparer's Signature (Including Internal Preparer)

Preparer's FEIN, SSN, or PTIN

Telephone Number (864) 288-5544

Date Signed (MM/DD/YY)



18112021019

Corporation Name **FINDETT REAL ESTATE CORPORATION**

Missouri Tax I.D. Number **1 0 7 5 1 2 3 8**

Federal Employer I.D. Number **4 3 0 7 8 7 4 6 3**

Charter Number **0 0 1 0 5 4 6 8**

Allocation of Missouri S Corporation Adjustment to Shareholders

1. Name of each shareholder. All shareholders must be listed. Use attachment if necessary.		2. Select if shareholder is nonresident	3. Social Security Number				4. Shareholder's Share %	5. Shareholder's Adjustment <input type="checkbox"/> Addition <input type="checkbox"/> Subtraction	
a)		<input type="checkbox"/>							00
b)		<input type="checkbox"/>							00
c)		<input type="checkbox"/>							00
d)		<input type="checkbox"/>							00
e)		<input type="checkbox"/>							00
f)		<input type="checkbox"/>							00
g)		<input type="checkbox"/>							00
h)		<input type="checkbox"/>							00
i)		<input type="checkbox"/>							00
j)		<input type="checkbox"/>							00
k)		<input type="checkbox"/>							00
l)		<input type="checkbox"/>							00
m)		<input type="checkbox"/>							00
n)		<input type="checkbox"/>							00
o)		<input type="checkbox"/>							00
p)		<input type="checkbox"/>							00
q)		<input type="checkbox"/>							00
r)		<input type="checkbox"/>							00
s)		<input type="checkbox"/>							00
Total							100	%	00

Column 4 - Enter percentages from Federal Schedule K-1(s). Round percentages to whole numbers.

Column 5 - Enter Missouri S corporation adjustment from Form MO-1120S, Line 13 or 14, as total of Column 5. Multiply each percentage in Column 4 by the total in Column 5. Indicate at the top of Column 5 whether the adjustments are additions or subtractions. The amount after each shareholder's name in Column 5 must be reported as a modification by the shareholder on his or her **Form MO-1040**, Individual Income Tax Return, either as an addition to, or subtraction from, federal adjusted gross income.

Mail To: Refund or No Amount Due:
Missouri Department of Revenue
P.O. Box 700
Jefferson City, MO 65105-0700

Phone: (573) 751-4541
Fax: (573) 522-1721
E-mail: corporate@dor.mo.gov

Form MO-1120S (Revised 12-2018)

Visit <http://dor.mo.gov/business/corporate/> for additional information.



18112031019

MISSOURI SCHEDULE K-1 EQUIVALENT	Shareholder's Information For Calendar Year 2018, or Fiscal Year	2018
Beginning _____, and Ending _____		
SHAREHOLDER'S NAME, ADDRESS, AND ZIP CODE GEORGE E. GARRISON (b) (6)		SHAREHOLDER'S SS#: (b) (6) SHAREHOLDER NO. <u>1</u> PERCENTAGE <u>100.0000</u> RESIDENCY STATUS: RESIDENT <input checked="" type="checkbox"/> NONRESIDENT <input type="checkbox"/>
S CORPORATION NAME, ADDRESS, AND ZIP CODE FINDETT REAL ESTATE CORPORATION PO BOX 960 ST. CHARLES, MO 63302-0960		MITS/MO ID NO. <u>10751238</u> FEDERAL ID NO. <u>43-0787463</u>

PART I - DISTRIBUTIVE SHARE ITEMS

Shareholder Adjustment - Net Addition		Shareholder Adjustment - Net Subtraction ...	
---	--	--	--

PART II - DISTRIBUTIVE MISSOURI CREDITS

New or Expanded Business Facility Credit	
Development Reserve Credit	
Infrastructure Development Credit	
Export Finance Credit	
Missouri Low Income Housing Credit	
Missouri Business Modernization and Technology (Seed Capital) Credit	
Neighborhood Assistance Credit	
Affordable Housing Assistance Credit	
Enterprise Zone Credit	
Small Business Incubator Credit	
Small Business Investment (Capital) Credit	
Community Bank Investment Credit	
Qualified Research Expense Credit	
Special Needs Adoption Credit	
Brownfield Jobs and Investment Credit	
Youth Opportunities Credit	
Processed Wood Energy Credit	
Missouri Business Use Incentives for Large-Scale Development (BUILD) Credit	
Maternity Home Credit	
Shelter for Victims of Domestic Violence Credit	
Historic Preservation Credit	
New Market Tax Credit	
Charcoal Producers Credit	
Film Production Credit	
Wine and Grape Production Credit	
Rebuilding Communities Credit	
Agricultural Product Utilization Contributor Credit	
New Generation Cooperative Incentive Credit	
Bank Tax Credit for S Corporation shareholders	
Family Development Account Credit	
New Enterprise Creation Credit	
Remediation Credit	
Rebuilding Communities and Neighborhood Preservation Act Credit	
Disabled Access Credit	
Bank Franchise Tax Credit	
Developmental Disability Care Provider Credit	
Transportation Development Credit	
Development Tax Credit	
Small Business Guaranty Fees Credit	
Bond Enhancement Credit	
Missouri Quality Jobs Credit	
New Enhanced Enterprise Zone Credit	

MISSOURI SCHEDULE K-1 EQUIVALENT

PART II - DISTRIBUTIVE MISSOURI CREDITS - CONTINUED

Dry Fire Hydrant Credit	
Champion for Children Credit	
Food Pantry Tax Credit	
Family Farms Act Credit	
Pregnancy Resource Credit	
Residential Treatment Agency Credit	
Distressed Area Land Assemblage Credit	
Qualified Beef Credit	
Alternative Fuel Infrastructure Credit	
Missouri Works Credit	
Sporting Event Credit	
Sporting Contribution Credit	

DIXON HUGHES GOODMAN LLP
P.O. BOX 25849
GREENVILLE, SC 29616

FINDETT REAL ESTATE CORPORATION
PO BOX 960
ST. CHARLES, MO 63302-0960

|||||

Caution: Forms printed from within Adobe Acrobat products may not meet IRS or state taxing agency specifications. When using Acrobat, select the "Actual Size" in the Adobe "Print" dialog.

CLIENT'S COPY



March 18, 2020

Findett Real Estate Corporation
PO Box 960
St. Charles, MO 63302-0960

Dear George:

On behalf of our team at Dixon Hughes Goodman LLP (DHG), we would like to express our deepest gratitude for allowing us to assist you with your 2019 tax reporting needs. Our mission, as always, is to help our clients achieve their goals and to do so as forthrightly and candidly as possible. Enclosed you will find your completed 2019 tax returns.

Tax Return Summary:

Jurisdiction- Form		Filing Method	Refund/Balance Due	Amount
Federal 1120S		E-File	NA	NA
Missouri MO-1120S	Main	E-File	NA	NA

Information Provided:

- **ACTION ITEMS:** The documents enclosed will need to be signed and returned to DHG's office, or mailed to the appropriate taxing authority by the due date indicated on the filing instructions. If your returns are to be filed electronically, they will not be filed until the signed documents are received by our office. Partner/Shareholder K-1s are included to be distributed to appropriate parties.
- **2019 TAX RETURNS:** Included are copies of your returns and supporting documents you may have furnished.

Your tax returns were prepared from information provided by you, without additional verification by DHG. Upon examination, taxing authorities may request additional information. DHG strongly recommends that you preserve all original source documents and other supporting information in the event of such requests. We also advise you to retain a copies of your 2019 returns, indefinitely.

Please note that the tax advice DHG has provided above and within this package, in connection with the preparation of your U.S. federal tax return, is not intended or written to be used by any taxpayer for the purpose of avoiding penalties that may be imposed on the taxpayer by the Internal Revenue Service.

Comprehensive Resources Available to You

With new legislation and the most extensive tax reform in more than 30 years, DHG understands you may have questions regarding the numerous changes to the Internal Revenue Code. We urge you to reach

out to our team to find up-to-date, innovative industry insights at www.dhg.com/tax, by clicking on "Tax Reform & Recent Developments".

We Welcome Your Feedback:

We value our relationship with you and thank you for the opportunity to be of service to you and your continued success. We would appreciate if you would take a few minutes to let us know if we met your expectations by visiting www.dhg.com/taxsurvey. The questionnaire takes less than five minutes to complete, and the feedback we receive is used for the continuous improvement of our services.

If you have further questions on any details contained in this letter, or on any other matter, please do not hesitate to contact us.

Warm Regards,

James F. Tenpas

Dixon Hughes Goodman LLP

2019 TAX RETURN FILING INSTRUCTIONS

U.S. INCOME TAX RETURN FOR AN S CORPORATION

FOR THE YEAR ENDING

December 31, 2019

Prepared For:

Findett Real Estate Corporation
PO Box 960
St. Charles, MO 63302-0960

Prepared By:

Dixon Hughes Goodman LLP
P.O. Box 25849
Greenville, SC 29616

To Be Signed and Dated By:

The appropriate corporate officer(s).

Amount of Tax:

Total tax	\$	0
Less: payments and credits	\$	0
Plus: interest and penalties	\$	0
No payment required	\$	

Overpayment:

Not applicable

Make Check Payable To:

Not applicable

Mail Tax Return and Check (if applicable) To:

This return has been prepared for electronic filing. To have it transmitted electronically to the IRS, please sign, date and return Form 8879-S to our office. We will then submit your electronic return.

Return Must be Mailed On or Before:

Return federal Form 8879-S to us by September 15, 2020.

Special Instructions:

Enclosed is a copy of Schedule K-1 to be distributed to the shareholder.

Number 1	Number
Name: GEORGE E.	Name:
GARRISON	K-1 TOTALS

Number 1	Number
Name: GEORGE E.	Name:
GARRISON	K-1 TOTALS

S CORPORATION
Two-Year Comparison

2019

Name	Employer Identification Number
FINDETT REAL ESTATE CORPORATION	43-0787463

Description	Prior Year	Current Year	Increase (Decrease)
ORDINARY BUSINESS INCOME (LOSS):			
INCOME:			
DEDUCTIONS:			
S CORPORATION TAXES:			
PAYMENTS AND CREDITS:			
BALANCE DUE OR REFUND:			
SCHEDULE K:			
INCOME:			
DEDUCTIONS:			
INVESTMENT INTEREST:			
CREDITS:			
FOREIGN TAXES:			
AMT ITEMS:			
OTHER SCHEDULE K ITEMS:			
SCHEDULE M-1:			
SCHEDULE M-2:			
ACCUMULATED ADJUSTMENTS ACCOUNT:			
BALANCE AT BEGINNING OF TAX YEAR	-12,868.	-12,868.	
COMBINE LINES 1 THROUGH 5	-12,868.	-12,868.	
BALANCE AT END OF TAX YEAR	-12,868.	-12,868.	

- ▶ ERO must obtain and retain completed Form 8879-S.
- ▶ Go to www.irs.gov/Form8879S for the latest information.

For calendar year 2019, or tax year beginning _____, 2019, and ending _____, 20_____

2019

Name of corporation

Employer identification number
43-0787463

FINDETT REAL ESTATE CORPORATION

Part I	Tax Return Information (Whole dollars only)
---------------	--

1	Gross receipts or sales less returns and allowances (Form 1120-S, line 1c)	1	
2	Gross profit (Form 1120-S, line 3)	2	
3	Ordinary business income (loss) (Form 1120-S, line 21)	3	
4	Net rental real estate income (loss) (Form 1120-S, Schedule K, line 2)	4	
5	Income (loss) reconciliation (Form 1120-S, Schedule K, line 18)	5	

Part II	Declaration and Signature Authorization of Officer (Be sure to get a copy of the corporation's return)
----------------	---

Under penalties of perjury, I declare that I am an officer of the above corporation and that I have examined a copy of the corporation's 2019 electronic income tax return and accompanying schedules and statements and to the best of my knowledge and belief, it is true, correct, and complete. I further declare that the amounts in Part I above are the amounts shown on the copy of the corporation's electronic income tax return. I consent to allow my electronic return originator (ERO), transmitter, or intermediate service provider to send the corporation's return to the IRS and to receive from the IRS **(a)** an acknowledgement of receipt or reason for rejection of the transmission, **(b)** the reason for any delay in processing the return or refund, and **(c)** the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the corporation's federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at **1-888-353-4537** no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the corporation's electronic income tax return and, if applicable, the corporation's consent to electronic funds withdrawal.

Officer's PIN: check one box only

☒ I authorize DIXON HUGHES GOODMAN LLP to enter my PIN 87463
as my signature on the corporation's 2019 electronically filed income tax return. **ERO firm name** **Don't enter all zeros**

☐ As an officer of the corporation, I will enter my PIN as my signature on the corporation's 2019 electronically filed income tax return.

Officer's signature _____ Date _____ Title ► **PARTNER**

Part III	Certification and Authentication
-----------------	---

ERO's EFIN/PIN. Enter your six-digit EFIN followed by your five-digit self-selected PIN. 57058050470
Don't enter all zeros

I certify that the above numeric entry is my PIN, which is my signature on the 2019 electronically filed income tax return for the corporation indicated above. I confirm that I am submitting this return in accordance with the requirements of **Pub. 3112**, IRS *e-file* Application and Participation, and **Pub. 4163**, Modernized e-File (MeF) Information for Authorized IRS *e-file* Providers for Business Returns.

ERO's signature ► **JAMES F. TENPAS** Date ►

ERO Must Retain This Form - See Instructions
Don't Submit This Form to the IRS Unless Requested To Do So

For Paperwork Reduction Act Notice, see instructions.

Form **8879-S** (2019)

LHA

Form **1120-S**Department of the Treasury
Internal Revenue Service**U.S. Income Tax Return for an S Corporation**

▶ Do not file this form unless the corporation has filed or is attaching Form 2553 to elect to be an S corporation.
▶ Go to www.irs.gov/Form1120S for instructions and the latest information.

OMB No. 1545-0123

2019

For calendar year 2019 or tax year beginning _____, ending _____

A S election effective date 01/01/2004	NAME OF CORPORATION FINDETT REAL ESTATE CORPORATION Number, street, and room or suite no. If a P.O. box, see instructions. PO BOX 960 City or town, state or province, country, and ZIP or foreign postal code ST. CHARLES, MO 63302-0960	D Employer identification number 43-0787463
B Business activity code number (see instructions) 531390		E Date incorporated 04/23/1962
C Check if Sch. M-3 attached <input type="checkbox"/>		F Total assets (see instructions) \$ 14,095.

G Is the corporation electing to be an S corporation beginning with this tax year? ☐ Yes ☒ No If "Yes," attach Form 2553 if not already filed

H Check if: (1) ☐ Final return (2) ☐ Name change (3) ☐ Address change (4) ☐ Amended return (5) ☐ S election termination or revocation

I Enter the number of shareholders who were shareholders during any part of the tax year **1**

J Check if corporation: (1) ☐ Aggregated activities for section 465 at-risk purposes (2) ☐ Grouped activities for section 469 passive activity purposes

Caution: Include **only** trade or business income and expenses on lines 1a through 21. See the instructions for more information.

Income	1 a Gross receipts or sales	b Return and allowances	c Bal. Subtract line 1b from line 1a	1c
	2 Cost of goods sold (attach Form 1125-A)			2
	3 Gross profit. Subtract line 2 from line 1c			3
	4 Net gain (loss) from Form 4797, line 17 (attach Form 4797)			4
	5 Other income (loss) (attach statement)			5
	6 Total income (loss). Add lines 3 through 5			6
Deductions (See instructions for limitations)	7 Compensation of officers (see instrs. - attach Form 1125-E)			7
	8 Salaries and wages (less employment credits)			8
	9 Repairs and maintenance			9
	10 Bad debts			10
	11 Rents			11
	12 Taxes and licenses			12
	13 Interest (see instructions)			13
	14 Depreciation not claimed on Form 1125-A or elsewhere on return (attach Form 4562)			14
	15 Depletion (Do not deduct oil and gas depletion.)			15
	16 Advertising			16
	17 Pension, profit-sharing, etc., plans			17
	18 Employee benefit programs			18
	19 Other deductions (attach statement)			19
	20 Total deductions. Add lines 7 through 19			20
	21 Ordinary business income (loss). Subtract line 20 from line 6			21 0.
Tax and Payments	22 a Excess net passive income or LIFO recapture tax (see instructions)	22a		22c
	b Tax from Schedule D (Form 1120-S)	22b		
	c Add lines 22a and 22b			
	23 a 2019 estimated tax payments and 2018 overpayment credited to 2019	23a		23e
	b Tax deposited with Form 7004	23b		
	c Credit for federal tax paid on fuels (attach Form 4136)	23c		
	d Reserved for future use	23d		
	e Add lines 23a through 23d			23e
	24 Estimated tax penalty (see instructions). Check if Form 2220 is attached <input type="checkbox"/>			24
	25 Amount owed. If line 23e is smaller than the total of lines 22c and 24, enter amount owed			25
	26 Overpayment. If line 23e is larger than the total of lines 22c and 24, enter amount overpaid			26
27 Enter amount from line 26: Credited to 2020 estimated tax Refunded			27	

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Sign Here ▶ Signature of officer **PARTNER** Title

May the IRS discuss this return with the preparer shown below? See instr.
☒ Yes ☐ No

Paid Preparer Use Only	Print/Type preparer's name JAMES F. TENPAS	Preparer's signature	Date	Check if self-employed <input type="checkbox"/>	PTIN P00688810
	Firm's name ▶ DIXON HUGHES GOODMAN LLP	Firm's EIN ▶ 56-0747981			
	Firm's address ▶ P.O. BOX 25849 GREENVILLE, SC 29616	Phone no. (864) 288-5544			

LHA For Paperwork Reduction Act Notice, see separate instructions.

911701 12-30-19

Form **1120-S** (2019)

Schedule B Other Information (see instructions)					Yes	No
1 Check accounting method: a <input type="checkbox"/> Cash b <input checked="" type="checkbox"/> Accrual c <input type="checkbox"/> Other (specify) 						
2 See the instructions and enter the:						
a Business activity REAL ESTATE b Product or service REAL ESTATE INVESTME						
3 At any time during the tax year, was any shareholder of the corporation a disregarded entity, a trust, an estate, or a nominee or similar person? If "Yes," attach Schedule B-1, Information on Certain Shareholders of an S Corporation						X
4 At the end of the tax year, did the corporation:						
a Own directly 20% or more, or own, directly or indirectly, 50% or more of the total stock issued and outstanding of any foreign or domestic corporation? For rules of constructive ownership, see instructions. If "Yes," complete (i) through (v) below						X
(i) Name of Corporation	(ii) Employer Identification Number (if any)	(iii) Country of Incorporation	(iv) Percentage of Stock Owned	(v) If Percentage in (iv) is 100%, Enter the Date (if any) a Qualified Subchapter S Subsidiary Election Was Made		
b Own directly an interest of 20% or more, or own, directly or indirectly, an interest of 50% or more in the profit, loss, or capital in any foreign or domestic partnership (including an entity treated as a partnership) or in the beneficial interest of a trust? For rules of constructive ownership, see instructions. If "Yes," complete (i) through (v) below						X
(i) Name of Entity	(ii) Employer Identification Number (if any)	(iii) Type of Entity	(iv) Country of Organization	(v) Maximum Percentage Owned in Profit, Loss, or Capital		
5a At the end of the tax year, did the corporation have any outstanding shares of restricted stock?						X
If "Yes," complete lines (i) and (ii) below.						
(i) Total shares of restricted stock 						
(ii) Total shares of non-restricted stock 						
b At the end of the tax year, did the corporation have any outstanding stock options, warrants, or similar instruments?						X
If "Yes," complete lines (i) and (ii) below.						
(i) Total shares of stock outstanding at the end of the tax year 						
(ii) Total shares of stock outstanding if all instruments were executed 						
6 Has this corporation filed, or is it required to file, Form 8918 , Material Advisor Disclosure Statement, to provide info. on any reportable transaction? ...						X
7 Check this box if the corporation issued publicly offered debt instruments with original issue discount <input type="checkbox"/>						
If checked, the corporation may have to file Form 8281 , Information Return for Publicly Offered Original Issue Discount Instruments.						
8 If the corporation (a) was a C corporation before it elected to be an S corporation or the corporation acquired an asset with a basis determined by reference to the basis of the asset (or the basis of any other property) in the hands of a C corporation and (b) has net unrealized built-in gain in excess of the net recognized built-in gain from prior years, enter the net unrealized built-in gain reduced by net recognized built-in gain from prior years ▶ \$ 						
9 Did the corporation have an election under section 163(j) for any real property trade or business or any farming business in effect during the tax year? See instructions						X
10 Does the corporation satisfy one or more of the following? See instructions						X
a The corporation owns a pass-through entity with current, or prior year carryover, excess business interest expense.						
b The corporation's aggregate average annual gross receipts (determined under section 448(c)) for the 3 tax years preceding the current tax year are more than \$26 million and the corporation has business interest expense.						
c The corporation is a tax shelter and the corporation has business interest expense.						
If "Yes," complete and attach Form 8990.						
11 Does the corporation satisfy both of the following conditions?					X	
a The corporation's total receipts (see instructions) for the tax year were less than \$250,000.						
b The corporation's total assets at the end of the tax year were less than \$250,000.						
If "Yes," the corporation is not required to complete Schedules L and M-1.						

Schedule B Other Information (see instructions) (continued)	Yes	No
12 During the tax year, did the corporation have any non-shareholder debt that was canceled, was forgiven, or had the terms modified so as to reduce the principal amount of the debt? If "Yes," enter the amount of principal reduction ▶ \$ _____		X
13 During the tax year, was a qualified subchapter S subsidiary election terminated or revoked? If "Yes," see instructions		X
14a Did the corporation make any payments in 2019 that would require it to file Form(s) 1099?		X
b If "Yes," did the corporation file or will it file required Form(s) 1099?		
15 Is the corporation attaching Form 8996 to certify as a Qualified Opportunity Fund?		X
If "Yes," enter the amount from Form 8996, line 14 ▶ \$ _____		

Schedule K Shareholders' Pro Rata Share Items		Total amount	
Income (Loss)	1 Ordinary business income (loss) (page 1, line 21)	1	
	2 Net rental real estate income (loss) (attach Form 8825) STATEMENT 1	2	
	3a Other gross rental income (loss) 3a		
	b Expenses from other rental activities (attach statement) 3b		
	c Other net rental income (loss). Subtract line 3b from line 3a	3c	
	4 Interest income	4	
	5 Dividends: a Ordinary dividends 5a		
	b Qualified dividends 5b		
	6 Royalties	6	
	7 Net short-term capital gain (loss) (attach Schedule D (Form 1120-S))	7	
Deductions	8a Net long-term capital gain (loss) (attach Schedule D (Form 1120-S))	8a	
	b Collectibles (28%) gain (loss) 8b		
	c Unrecaptured section 1250 gain (attach statement) 8c		
	9 Net section 1231 gain (loss) (attach Form 4797)	9	
	10 Other income (loss) (see instructions) ... Type ▶	10	
	11 Section 179 deduction (attach Form 4562)	11	
	12a Charitable contributions	12a	
	b Investment interest expense	12b	
	c Section 59(e)(2) expenditures (1) Type ▶ (2) Amount ▶	12c(2)	
	d Other deductions (see instructions) Type ▶	12d	
Credits	13a Low-income housing credit (section 42(j)(5))	13a	
	b Low-income housing credit (other)	13b	
	c Qualified rehabilitation expenditures (rental real estate) (attach Form 3468, if applicable)	13c	
	d Other rental real estate credits (see instructions) Type ▶	13d	
	e Other rental credits (see instructions) Type ▶	13e	
	f Biofuel producer credit (attach Form 6478)	13f	
	g Other credits (see instructions) Type ▶	13g	
Foreign Transactions	14a Name of country or U.S. possession ▶		
	b Gross income from all sources	14b	
	c Gross income sourced at shareholder level	14c	
	Foreign gross income sourced at corporate level		
	d Reserved for future use	14d	
	e Foreign branch category	14e	
	f Passive category	14f	
	g General category	14g	
	h Other (attach statement)	14h	
	Deductions allocated and apportioned at shareholder level		
	i Interest expense	14i	
	j Other	14j	
	Deductions allocated and apportioned at corporate level to foreign source income		
	k Reserved for future use	14k	
	l Foreign branch category	14l	
	m Passive category	14m	
	n General category	14n	
	o Other (attach statement)	14o	
Other information			
p Total foreign taxes (check one): <input type="checkbox"/> Paid <input type="checkbox"/> Accrued ▶	14p		
q Reduction in taxes available for credit (attach statement)	14q		
r Other foreign tax information (attach statement)			

Schedule K Shareholders' Pro Rata Share Items (continued)		Total amount
Alternative Minimum Tax (AMT) Items	15a Post-1986 depreciation adjustment	15a
	b Adjusted gain or loss	15b
	c Depletion (other than oil and gas)	15c
	d Oil, gas, and geothermal properties - gross income	15d
	e Oil, gas, and geothermal properties - deductions	15e
	f Other AMT items (attach statement)	15f
Items Affecting Shareholder Basis	16a Tax-exempt interest income	16a
	b Other tax-exempt income	16b
	c Nondeductible expenses	16c
	d Distributions (attach statement if required)	16d
	e Repayment of loans from shareholders	16e
Other Information	17a Investment income	17a
	b Investment expenses	17b
	c Dividend distributions paid from accumulated earnings and profits	17c
	d Other items and amounts (att. stmt.)	
Reconciliation	18 Income (loss) reconciliation. Combine the amounts on lines 1 through 10 in the far right column. From the result, subtract the sum of the amounts on lines 11 through 12d and 14p	18

Schedule L Balance Sheets per Books		Beginning of tax year		End of tax year	
Assets		(a)	(b)	(c)	(d)
1	Cash				
2 a	Trade notes and accounts receivable				
b	Less allowance for bad debts	()		()	
3	Inventories				
4	U.S. government obligations				
5	Tax-exempt securities				
6	Other current assets (att. stmt.)				
7	Loans to shareholders				
8	Mortgage and real estate loans				
9	Other investments (att. stmt.)				
10 a	Buildings and other depreciable assets				
b	Less accumulated depreciation	()		()	
11 a	Depletable assets				
b	Less accumulated depletion	()		()	
12	Land (net of any amortization)		14,095.		14,095.
13 a	Intangible assets (amortizable only)	150,000.		150,000.	
b	Less accumulated amortization	(150,000.)	0.	(150,000.)	0.
14	Other assets (att. stmt.)				
15	Total assets		14,095.		14,095.
Liabilities and Shareholders' Equity					
16	Accounts payable				
17	Mortgages, notes, bonds payable in less than 1 year				
18	Other current liabilities (att. stmt.)				
19	Loans from shareholders				
20	Mortgages, notes, bonds payable in 1 year or more				
21	Other liabilities (att. stmt.)				
22	Capital stock		13,248.		13,248.
23	Additional paid-in capital		8,175.		8,175.
24	Retained earnings		2,431,599.		2,431,599.
25	Adjustments to shareholders' equity (att. stmt.)				
26	Less cost of treasury stock		(2,438,927.)		(2,438,927.)
27	Total liabilities and shareholders' equity		14,095.		14,095.

Form 1120-S (2019)

Schedule M-1**Reconciliation of Income (Loss) per Books With Income (Loss) per Return**

Note: The corporation may be required to file Schedule M-3. See instructions.

1 Net income (loss) per books		5 Income recorded on books this year not included on Schedule K, lines 1 through 10 (itemize): a Tax-exempt interest \$	
2 Income included on Schedule K, lines 1, 2, 3c, 4, 5a, 6, 7, 8a, 9, and 10, not recorded on books this year (itemize):		6 Deductions included on Schedule K, lines 1 through 12 and 14p, not charged against book income this year (itemize): a Depreciation \$	
3 Expenses recorded on books this year not included on Schedule K, lines 1 through 12 and 14p (itemize): a Depreciation \$		7 Add lines 5 and 6	
b Travel and entertainment \$		8 Income (loss) (Schedule K, line 18). Subtract line 7 from line 4	
4 Add lines 1 through 3			

Schedule M-2**Analysis of Accumulated Adjustments Account, Shareholders' Undistributed Taxable Income Previously Taxed, Accumulated Earnings and Profits, and Other Adjustments Account** (see instrs.)

	(a) Accumulated adjustments account	(b) Shareholders' undistributed taxable income previously taxed	(c) Accumulated earnings and profits	(d) Other adjustments account
1 Balance at beginning of tax year	-12,868.			
2 Ordinary income from page 1, line 21				
3 Other additions				
4 Loss from page 1, line 21	()			
5 Other reductions	()			()
6 Combine lines 1 through 5	-12,868.			
7 Distributions				
8 Balance at end of tax year. Subtract line 7 from line 6	-12,868.			

Form **1120-S** (2019)

**Rental Real Estate Income and Expenses of a
Partnership or an S Corporation**

▶ Attach to Form 1065 or Form 1120S.
▶ Go to www.irs.gov/Form8825 for the latest information.

OMB No. 1545-0123

Name	FINDETT REAL ESTATE CORPORATION	Employer identification number	43 0787463
------	---------------------------------	--------------------------------	------------

1	Show the type and address of each property. For each rental real estate property listed, report the number of days rented at fair rental value and days with personal use. See instructions. See page 2 to list additional properties.			
	Physical address of each property - street, city, state, ZIP code	Type - Enter code 1-8; see page 2 for list	Fair Rental Days	Personal Use Days
A	8 GOVERNOR DRIVE			
B	ST. CHARLES, MO 63301-7311	8 - LAND & BUILDING		
C				
D				

		Properties			
Rental Real Estate Income		A	B	C	D
2	Gross rents	2			
Rental Real Estate Expenses					
3	Advertising	3			
4	Auto and travel	4			
5	Cleaning and maintenance	5			
6	Commissions	6			
7	Insurance	7			
8	Legal and other professional fees	8			
9	Interest	9			
10	Repairs	10			
11	Taxes	11			
12	Utilities	12			
13	Wages and salaries	13			
14	Depreciation (see instructions)	14			
15	Other (list) ▶	15			
16	Total expenses for each property. Add lines 3 through 15	16			
17	Income or (Loss) from each property. Subtract line 16 from line 2	17			

18a	Total gross rents. Add gross rents from line 2, columns A through H	18a	
b	Total expenses. Add total expenses from line 16, columns A through H	18b	()
19	Net gain (loss) from Form 4797, Part II, line 17, from the disposition of property from rental real estate activities	19	
20a	Net income (loss) from rental real estate activities from partnerships, estates, and trusts in which this partnership or S corporation is a partner or beneficiary (from Schedule K-1)	20a	
b	Identify below the partnerships, estates, or trusts from which net income (loss) is shown on line 20a. Attach a schedule if more space is needed:		
(1) Name	(2) Employer identification number		
21	Net rental real estate income (loss). Combine lines 18a through 20a. Enter the result here and on:	21	0.
• Form 1065 or 1120S: Schedule K, line 2			

For Paperwork Reduction Act Notice, see instructions.

920141
04-01-19 LHA

Form 8825 (Rev. 11-2018)

1	Show the type and address of each property. For each rental real estate property listed, report the number of days rented at fair rental value and days with personal use. See instructions.			
	Physical address of each property - street, city, state, ZIP code	Type - Enter code 1-8; see below for list	Fair Rental Days	Personal Use Days
E				
F				
G				
H				

		Properties			
		E	F	G	H
Rental Real Estate Income					
2	Gross rents	2			
Rental Real Estate Expenses					
3	Advertising	3			
4	Auto and travel	4			
5	Cleaning and maintenance	5			
6	Commissions	6			
7	Insurance	7			
8	Legal and other professional fees	8			
9	Interest	9			
10	Repairs	10			
11	Taxes	11			
12	Utilities	12			
13	Wages and salaries	13			
14	Depreciation (see instructions)	14			
15	Other (list) ▶	15			
				
				
16	Total expenses for each property. Add lines 3 through 15	16			
17	Income or (Loss) from each property. Subtract line 16 from line 2	17			

Allowable Codes for Type of Property

- 1 - Single Family Residence
- 2 - Multi-Family Residence
- 3 - Vacation or Short-Term Rental
- 4 - Commercial
- 5 - Land
- 6 - Royalties
- 7 - Self-Rental
- 8 - Other (include description with the code on Form 8825 or on a separate statement)

Form **8825** (Rev. 11-2018)

SCHEDULE K	NET RENTAL REAL ESTATE INCOME (LOSS)		STATEMENT 1
DESCRIPTION	INCOME	EXPENSES	NET AMOUNT
LAND & BUILDING	0.	0.	0.
TOTAL NET AMOUNT TO SCHEDULE K, LINE 2	0.	0.	0.

**Schedule K-1
(Form 1120-S)**Department of the Treasury
Internal Revenue Service**2019**☐ Final K-1 ☐ Amended K-1

OMB No. 1545-0123

For calendar year 2019, or tax
year beginning _____
ending _____**Shareholder's Share of Income, Deductions,
Credits, etc.** ▶ See separate instructions.

Part I Information About the Corporation		Part III Shareholder's Share of Current Year Income, Deductions, Credits, and Other Items	
A Corporation's employer identification number 43-0787463		1 Ordinary business income (loss)	13 Credits
B Corporation's name, address, city, state, and ZIP code FINDETT REAL ESTATE CORPORATION PO BOX 960 ST. CHARLES, MO 63302-0960		2 Net rental real estate inc (loss)	
C IRS Center where corporation filed return E-FILE		3 Other net rental income (loss)	
Part II Information About the Shareholder		4 Interest income	
D Shareholder's identifying number (b) (6)		5a Ordinary dividends	
E Shareholder's name, address, city, state and ZIP code GEORGE E. GARRISON (b) (6)		5b Qualified dividends	14 Foreign transactions
F Shareholder's percentage of stock ownership for tax year 100.000000 %		6 Royalties	
For IRS Use Only		7 Net short-term capital gain (loss)	
		8a Net long-term capital gain (loss)	
		8b Collectibles (28%) gain (loss)	
		8c Unrecaptured sec 1250 gain	
		9 Net section 1231 gain (loss)	
		10 Other income (loss)	15 Alternative min tax (AMT) items
		11 Section 179 deduction	16 Items affecting shareholder basis
		12 Other deductions	
			17 Other information
	18 <input type="checkbox"/> More than one activity for at-risk purposes*		
	19 <input type="checkbox"/> More than one activity for passive activity purposes*		

*See attached statement for additional information.

Schedule of Activities

For calendar year 2019, or tax year beginning

, 2019, and ending

FINDETT REAL ESTATE CORPORATION

43-0787463

Name: GEORGE E. GARRISON

(b) (6)

For:

Description of Activity	Activity Number	100% Disposed	PTP	P/T 199A	Type Code *	Description
	1				8	LAND & BUILDING

	Activity - 1	Activity -	Activity -
Ordinary business income (loss)			
Net rental real estate income (loss)			
Other net rental income (loss)			
Interest income			
Dividends - Ordinary dividends			
- Qualified dividends			
- Dividend equivalents (1065 only)			
Royalties			
Net short-term capital gain (loss)			
Net long-term capital gain (loss)			
- Collectibles (28%) gain (loss)			
- Unrecaptured Section 1250 gain			
Net section 1231 gain (loss)			
Other portfolio income			
Section 1256 contracts and straddles			
Other income			
Section 179 deduction			
Charitable contributions			
Portfolio deductions			
Investment interest expense			
Section 59(e)(2) expenditures			
Excess business interest expense			
Other deductions			
Net earnings from self-employment			
Gross farming or fishing income			
Gross nonfarm income			
LIH credit - Section 42(j)(5) partnerships			
- Other			
Qualified rehabilitation expenditures related to rental real estate			
Other rental credits			
Credits related to other rental activities			
Recapture of LIH credit - Section 42(j)(5) partnerships			
- Other			
Other credits			
Post-1986 depreciation adjustment			
Adjusted gain or loss			
Portion of adjusted gain/loss allocable to short-term gain/loss			
Portion of adjusted gain/loss allocable to long-term gain/loss			
Portion of adjusted gain/loss allocable to section 1231 gain/loss			
Depletion (other than oil and gas)			
Oil, gas and geothermal properties - gross income			
Oil, gas and geothermal properties - deductions			
Other AMT items			
Investment income			
Investment expenses			
Section 199A - W-2 wages			
- Unadjusted basis of assets			
- REIT dividends			
- Cooperative qualified business income			
- Cooperative W-2 wages			

2019 TAX RETURN FILING INSTRUCTIONS

MISSOURI FORM MO-1120S

FOR THE YEAR ENDING

December 31, 2019

Prepared For:

Findett Real Estate Corporation
PO Box 960
St. Charles, MO 63302-0960

Prepared By:

Dixon Hughes Goodman LLP
P.O. Box 25849
Greenville, SC 29616

To be Signed and dated by:

Not applicable

Amount of Tax:

Total tax	\$	0
Less: payments and credits	\$	0
Plus: other amount	\$	0
Plus: interest and penalties	\$	0
No payment required	\$	

Overpayment:

Not applicable

Make Check Payable To:

Not applicable

Mail Tax Return To:

The return has been prepared for electronic filing. If you wish to have it transmitted to the MO DOR, please contact our office and we will submit your electronic return. Do not mail the paper copy of the return.

Return Must Be Mailed On or Before:

Return federal Form 8879-S to us by April 15, 2020.

Special Instructions:

Enclosed is a copy of Schedule K-1 to be distributed to the shareholder.

MISSOURI DEPARTMENT OF
REVENUE
2019 S-Corporation Income Tax ReturnDepartment Use Only
(MM/DD/YY)Missouri Tax
I.D. Number

1	0	7	5	1	2	3	8

Missouri S-Corporation Income Beginning
Tax Return for 2019 (MM/DD/YY)

0	1	0	1	1	9
---	---	---	---	---	---

Ending
(MM/DD/YY)

1	2	3	1	1	9
---	---	---	---	---	---

Federal Employer

I.D. Number

4	3	0	7	8	7	4	6	3
---	---	---	---	---	---	---	---	---

Charter

Number

0	0	1	0	5	4	6	8		
---	---	---	---	---	---	---	---	--	--

Corporation

Name

FINDETT REAL ESTATE CORPORATION

Address

PO BOX 960

City

ST. CHARLES

State

MO

ZIP

63302-0960



1912011019

☐ Select this box if you have an approved federal extension. Attach a copy of the approved Federal Extension (Form 7004).

Select Applicable Boxes. Failure to select the address change box may result in mailings going to the last address on file.

☐ Amended Return ☐ Name Change ☐ Address Change ☐ Final Return and Close Account ☐ Bankruptcy

S-Corporation

1. Does the S corporation have any Missouri modifications? ☐ Yes ☒ No
If Yes, complete Lines 1-14 on pages 1 and 2, and the shareholder information on page 3.
2. Does the S corporation have any nonresident shareholders? ☐ Yes ☒ No
If Yes, complete Lines 1-14 on pages 1 and 2, the shareholder information on page 3, and **Form MO-NRS**.
3. Does the S corporation have income derived from sources other than Missouri? ☐ Yes ☒ No
If Yes, complete and attach **Form MO-MSS**.

S-Corporation Adjustments

Additions

- 1a. State and local income taxes deducted on Federal Form 1120S 1a .00
- 1b. Less: Kansas City & St. Louis earnings taxes. Enter Lines 1a less 1b
on Line 1 1b .00 1 .00
- 2a. State and local bond interest (except Missouri) 2a .00
- 2b. Less: related expenses (omit if less than \$500)
Enter Line 2a less Line 2b on Line 2 2b .00 2 .00
3. ☐ Partnership ☐ Fiduciary ☐ Other adjustments (list 3 .00
4. Donations claimed for the Food Pantry Tax Credit deducted from federal taxable income,
Section 135.647, RSMo 4 .00
5. Total of Lines 1 through 4 5 .00

Subtractions

- 6a. Interest from exempt federal obligations 6a .00
- 6b. Less: related expenses (omit if < \$500) Enter Line 6a less Line 6b
on Line 6 6b .00 6 .00
7. Amount of any state income tax refund included in federal ordinary income 7 .00
8. Federally taxable - Missouri exempt obligations 8 .00

S-Corporation Adjustments

Subtractions (continued)

9. ☐ Partnership ☐ Fiduciary ☐ Build America and Recovery Zone Bond Interest☐ Missouri Public-Private Transportation Act ☐ Other adjustments (list _____) 9 .0010. Missouri depreciation basis adjustment (**Section 143.121.3(7), RSMo**) 10 .0011. Depreciation recovery on qualified property that is sold (**Section 143.121.3(9), RSMo**) 11 .00

12. Total Subtractions - Add Lines 6 through 11 12 .00

13. Missouri S corporation adjustment - Net Addition - excess Line 5 over Line 12 13 .00

14. Missouri S corporation adjustment - Net Subtraction - excess Line 12 over Line 5 14 .00

15. Agriculture Disaster Relief (**Section 143.121.3(10), RSMo**) 15 .00

Department Use Only

Under penalties of perjury, I declare that the above information and any attached supplement is true, complete, and correct.

A R N S E
☐ ☐ ☐ ☐ ☐I authorize the Director of Revenue or delegate to discuss my return and attachments with the preparer or any member of his or her firm, or if internally prepared, any member of the internal staff ☒ Yes ☐ No

Signature

Signature of Officer _____

Printed Name _____

Telephone Number _____

Date Signed (MM/DD/YY) _____

Preparer's Signature (Including Internal Preparer) _____

Preparer's FEIN, SSN, or PTIN **P 0 0 6 8 8 8 1 0**Telephone Number **(864) 288-5544**

Date Signed (MM/DD/YY) _____



19112021019

Corporation Name **FINDETT REAL ESTATE CORPORATION**

Missouri Tax I.D. Number **1 0 7 5 1 2 3 8**

Federal Employer I.D. Number **4 3 0 7 8 7 4 6 3**

Charter Number **0 0 1 0 5 4 6 8**

Allocation of Missouri S Corporation Adjustment to Shareholders

1. Name of each shareholder. All shareholders must be listed. Use attachment if necessary.		2. Select if shareholder is nonresident	3. Social Security Number				4. Shareholder's Share %	5. Shareholder's Adjustment <input type="checkbox"/> Addition <input type="checkbox"/> Subtraction	
a)		<input type="checkbox"/>							00
b)		<input type="checkbox"/>							00
c)		<input type="checkbox"/>							00
d)		<input type="checkbox"/>							00
e)		<input type="checkbox"/>							00
f)		<input type="checkbox"/>							00
g)		<input type="checkbox"/>							00
h)		<input type="checkbox"/>							00
i)		<input type="checkbox"/>							00
j)		<input type="checkbox"/>							00
k)		<input type="checkbox"/>							00
l)		<input type="checkbox"/>							00
m)		<input type="checkbox"/>							00
n)		<input type="checkbox"/>							00
o)		<input type="checkbox"/>							00
p)		<input type="checkbox"/>							00
q)		<input type="checkbox"/>							00
r)		<input type="checkbox"/>							00
s)		<input type="checkbox"/>							00
Total							100	%	00

Column 4 - Enter percentages from Federal Schedule K-1(s). Round percentages to whole numbers.

Column 5 - Enter Missouri S corporation adjustment from Form MO-1120S, Line 13 or 14, as total of Column 5. Multiply each percentage in Column 4 by the total in Column 5. Indicate at the top of Column 5 whether the adjustments are additions or subtractions. The amount after each shareholder's name in Column 5 must be reported as a modification by the shareholder on his or her **Form MO-1040**, Individual Income Tax Return, either as an addition to, or subtraction from, federal adjusted gross income.

Form MO-1120S (Revised 12-2019)

Mail To: Refund or No Amount Due:
Missouri Department of Revenue
P.O. Box 700
Jefferson City, MO 65105-0700

Phone: (573) 751-4541
Fax: (573) 522-1721
E-mail: corporate@dor.mo.gov

Visit <http://dor.mo.gov/business/corporate/> for additional information.



19112031019

MISSOURI SCHEDULE K-1 EQUIVALENT	Shareholder's Information For Calendar Year 2019, or Fiscal Year	2019
Beginning _____, and Ending _____		
SHAREHOLDER'S NAME, ADDRESS, AND ZIP CODE GEORGE E. GARRISON (b) (6)		SHAREHOLDER'S SS#: (b) (6) SHAREHOLDER NO. <u>1</u> PERCENTAGE <u>100.0000</u> RESIDENCY STATUS: RESIDENT <input checked="" type="checkbox"/> NONRESIDENT <input type="checkbox"/>
S CORPORATION NAME, ADDRESS, AND ZIP CODE FINDETT REAL ESTATE CORPORATION PO BOX 960 ST. CHARLES, MO 63302-0960		MITS/MO ID NO. <u>10751238</u> FEDERAL ID NO. <u>43-0787463</u>

PART I - DISTRIBUTIVE SHARE ITEMS

Shareholder Adjustment - Net Addition		Shareholder Adjustment - Net Subtraction ...	
---	--	--	--

PART II - DISTRIBUTIVE MISSOURI CREDITS

New or Expanded Business Facility Credit	
Development Reserve Credit	
Infrastructure Development Credit	
Export Finance Credit	
Missouri Low Income Housing Credit	
Missouri Business Modernization and Technology (Seed Capital) Credit	
Neighborhood Assistance Credit	
Affordable Housing Assistance Credit	
Enterprise Zone Credit	
Small Business Incubator Credit	
Small Business Investment (Capital) Credit	
Community Bank Investment Credit	
Qualified Research Expense Credit	
Special Needs Adoption Credit	
Brownfield Jobs and Investment Credit	
Youth Opportunities Credit	
Processed Wood Energy Credit	
Missouri Business Use Incentives for Large-Scale Development (BUILD) Credit	
Maternity Home Credit	
Shelter for Victims of Domestic Violence Credit	
Historic Preservation Credit	
New Market Tax Credit	
Charcoal Producers Credit	
Film Production Credit	
Wine and Grape Production Credit	
Rebuilding Communities Credit	
Agricultural Product Utilization Contributor Credit	
New Generation Cooperative Incentive Credit	
Bank Tax Credit for S Corporation shareholders	
Family Development Account Credit	
New Enterprise Creation Credit	
Remediation Credit	
Rebuilding Communities and Neighborhood Preservation Act Credit	
Disabled Access Credit	
Bank Franchise Tax Credit	
Developmental Disability Care Provider Credit	
Transportation Development Credit	
Development Tax Credit	
Small Business Guaranty Fees Credit	
Bond Enhancement Credit	
Missouri Quality Jobs Credit	
New Enhanced Enterprise Zone Credit	

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PART II - DISTRIBUTIVE MISSOURI CREDITS - CONTINUED

Dry Fire Hydrant Credit	
Champion for Children Credit	
Food Pantry Tax Credit	
Family Farms Act Credit	
Pregnancy Resource Credit	
Residential Treatment Agency Credit	
Distressed Area Land Assemblage Credit	
Qualified Beef Credit	
Alternative Fuel Infrastructure Credit	
Missouri Works Credit	
Sporting Event Credit	
Sporting Contribution Credit	